DEPARTMENT OF HEALTH CARE SERVICES LICENSING AND CERTIFICATION SECTION STATUS REPORT

This is an alphabetical list by county of all non-medical alcoholism and drug abuse recovery or treatment facilities licensed and/or certified by the Department of Health Care Services.

To view facilities within a specific county, simply click on the county name below. For easier browsing and navigation through this report, please access the <u>"Page and Bookmark"</u> View option on your Adobe Reader.

Alameda County	Madera County	San Joaquin County
Alameda County	<u>Madera County</u>	
Alpine County	Marin County	San Luis Obispo County
Amador County	Mariposa County	San Mateo County
Butte County	Mendocino County	Santa Barbara County
Calaveras County	Merced County	Santa Clara County
Colusa County	Modoc County	Santa Cruz County
Contra Costa County	Mono County	Shasta County
Del Norte County	Monterey County	Sierra County
El Dorado County	Napa County	Siskiyou County
Fresno County	Nevada County	Solano County
Glenn County	Orange County	Sonoma County
Humboldt County	Placer County	Stanislaus County
Imperial County	Plumas County	Sutter County
Inyo County	Riverside County	Tehama County
Kern County	Sacramento County	Trinity County
Kings County	San Benito County	Tulare County
Lake County	San Bernardino County	Tuolumne County
Lassen County	San Diego County	Ventura County
Los Angeles County	San Francisco County	Yolo County
		Yuba County

COMMENTS?

We are always looking for ways to improve this document. If you have any comments or suggestions, please e-mail them to hilda.espinoza@dhcs.ca.gov, or contact the Licensing and Certification Section at (916) 322-2911.

LEGEND

CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES LICENSED RESIDENTIAL FACILITIES AND/OR CERTIFIED ALCOHOL AND DRUG PROGRAMS

Program Name: The facility/program name.

Legal Name: The legal name of the entity having the authority and responsibility for the operation

of the facility or program.

Address: The facility/ program address. The location where services are provided.

City/State: Name of the city where the facility/ program is located.

Record ID: The identification number issued by the Department of Health Care Services (DHCS),

Licensing and Certification Section (LCS), for licensed facilities or certified programs.

The last digit tells if the facility/ program is a nonprofit (N) or profit (P) entity.

Service Type: Indicates if the facility/program is:

 RES - Indicates facility licensed by the Department of Health Care Services (DHCS), the licensing authority for 24-hour residential nonmedical alcoholism or drug abuse recovery or treatment facilities serving adults.

• NON - Indicates a nonresidential program which has voluntarily applied to DHCS for alcohol and/ or drug certification.

• DETOX - Indicates a free standing, 24-hour nonmedical detoxification facility licensed by DHCS.

- RES-DETOX Indicates a facility licensed by DHCS to provide 24-hour residential nonmedical alcohol and/or drug recovery, treatment, and detoxification services for adults.
- DPH Indicates licensure by the Department of Public Health, the licensing authority for medical alcohol and drug recovery or treatment facilities whose programs are certified by DHCS. Typically, these are Chemical Dependency Recovery Hospitals.
- DSS Indicates licensure by the Department of Social Services, the licensing authority for residential facilities for individuals in need of care and supervision whose programs are certified by DHCS. Typically, these are group homes.
- COR Indicates the facility is under the jurisdiction of the Department of Corrections and Rehabilitation (locked facility) whose program is certified by DHCS.
- IMS Indicates services provided at a licensed residential facility by a health care practitioner that address medical issues associated with either detoxification or the provision of alcoholism or drug abuse recovery or treatment services to assist in the enhancement of treatment services. IMS do not include the provision of general primary medical care. IMS must be related to the patient's process of moving into long-term recovery.

Resident Capacity: Indicates the maximum number of residents authorized by DHCS to receive recovery, treatment, or detoxification services at any one time in the residential facility.

Total Occupancy: Designates the maximum number of residential facility participants plus any

dependent children, staff, or volunteers who may be housed in the facility. This

occupancy is approved by the State or local fire authority.

(The resident capacity and total occupancy are only indicated for licensed <u>residential</u> facilities. Certified <u>nonresidential</u> facilities show "0" as the resident capacity and total occupancy.)

Target Population: Describes the targeted population of the facility or program.

- 1.1 Co-Ed
- 1.2 Men Only
- 1.3 Women Only
- 1.4 Women/Children
- 1.5 Youth/Adolescents
- 1.7 Families
- 1.8 Dual Diagnosis
- 1.9 Co-Ed/Children
- 1.10 Co-Ed/Youth
- 1.11 Men/Youth
- 1.12 Women/Youth
- 1.13 Co-Ed/Child/Dual
- 1.14 Women/Child/Dual

Expiration Date: Expiration date of the facility's current license and/or certification.

As of 11/1/2017

Alameda County

Program Name: CHRYSALIS

Legal Name: HORIZON SERVICES, INCORPORATED

Address: 3837, 3839, 3841, 3843, 3845 AND 3847 TELEGRAPH AVENUE

City, State Zip: OAKLAND, CA 94609

Phone: (510) 450-1190 Fax: (510) 655-3520

Record ID: 010001AN

Service Type: RES
Resident Capacity: 20
Total Occupancy: 20
Target Population: 1.3

Expiration Date: 10/31/2019 IMS: No

Program Name: CRONIN HOUSE

Legal Name: HORIZON SERVICES, INCORPORATED

Address: 2595 DEPOT ROAD City, State Zip: HAYWARD, CA 94545

Phone: (510) 784-5874 Fax: (510) 784-9194

Record ID: 010001BN

Service Type: RES
Resident Capacity: 34
Total Occupancy: 34
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: CHERRY HILL DETOXIFICATION SERVICES PROGRAM

Legal Name: HORIZON SERVICES, INCORPORATED

Address: 2035 FAIRMONT DRIVE City, State Zip: SAN LEANDRO, CA 94578

Phone: (866) 866-7496 Fax: (510) 351-7630

Record ID: 010001DN

Service Type: RES-DETOX

Resident Capacity: 32 Total Occupancy: 32 Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: COMMUNITY RECOVERY CENTER EAST
Legal Name: THE WEST OAKLAND HEALTH COUNCIL
Address: 7501 INTERNATIONAL BOULEVARD

City, State Zip: OAKLAND, CA 94621

Phone: (510) 729-8800 Fax: (510) 569-4965

Record ID: 010005FN

Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: COMMUNITY RECOVERY CENTER WEST
Legal Name: THE WEST OAKLAND HEALTH COUNCIL

Address: 700 ADELINE STREET City, State Zip: OAKLAND, CA 94607

Phone: (510) 465-1800 Ext:2055 Fax: (510) 465-1508

Record ID: 010005JN

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: ORCHID WOMEN'S RECOVERY CENTER

Legal Name: BI-BETT

Address: 1342 EAST 27TH STREET City, State Zip: OAKLAND, CA 94606

Phone: (510) 535-0611 Fax: (510) 535-1358

Record ID: 010006AN

Service Type: RES Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.4

Expiration Date: 4/30/2018 IMS: No

Program Name: EAST OAKLAND RECOVERY CENTER

Legal Name: BI-BETT

Address: 7200 BANCROFT AVENUE,

SUITE 176

City, State Zip: OAKLAND, CA 94605

Phone: (510) 568-2432 Fax: (510) 568-3912

Record ID: 010006DN
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: C.U.R.A., INC.

Legal Name: CARNALES UNIDOS REFORMANDO ADICTOS INCORPORATE

Address: 37437 GLENMOOR DRIVE City, State Zip: FREMONT, CA 94536

Phone: (510) 713-3200 Fax: (510) 713-0684

Record ID: 010010AN

Service Type: RES
Resident Capacity: 51
Total Occupancy: 51
Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: C.U.R.A., INC. OUTPATIENT PROGRAM

Legal Name: CARNALES UNIDOS REFORMANDO ADICTOS INCORPORATE

Address: 37469 AND 37471 GLENMOOR DRIVE

City, State Zip: FREMONT, CA 94536

Phone: (510) 713-3202 Fax: (510) 713-0684

Record ID: 010010BN

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: NEW BRIDGE FOUNDATION

Legal Name: THE NEW BRIDGE FOUNDATION, INC. Address: 1816 AND 1820 SCENIC AVENUE

City, State Zip: BERKELEY, CA 94709

Phone: (510) 548-7270 Fax: (510) 665-3176

Record ID: 010013AN
Service Type: RES-DETOX

Resident Capacity: 93
Total Occupancy: 93
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: Yes

Program Name: NEW BRIDGE FOUNDATION

Legal Name: THE NEW BRIDGE FOUNDATION, INC.

Address: 1816 SCENIC AVENUE City, State Zip: BERKELEY, CA 94709

Phone: (510) 548-7270 Fax: (510) 548-1060

Record ID: 010013BN

Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: NEW BRIDGE FOUNDATION, INC.
Legal Name: THE NEW BRIDGE FOUNDATION, INC.

Address: 2323 HEARST AVENUE City, State Zip: BERKELEY, CA 94709

Phone: (510) 548-7270 Fax: (510) 665-3176

Record ID: 010013CN
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: ALAMEDA HOUSE

Legal Name: THE SOLIDARITY FELLOWSHIP, INC. Address: 34401 AND 34413 BLACKSTONE WAY

City, State Zip: FREMONT, CA 94555 Phone: (510) 796-7120

Record ID: 010019AN
Service Type: RES
Resident Capacity: 12
Total Occupancy: 14
Target Population: 1.2

Expiration Date: 5/31/2018 IMS: No

Program Name: PROJECT PRIDE RESIDENTIAL PROGRAM FOR WOMEN & CHILDREN

Legal Name: EAST BAY COMMUNITY RECOVERY PROJECT

Address: 2545 SAN PABLO AVENUE City, State Zip: OAKLAND, CA 94612

Phone: (510) 446-7150 Fax: (510) 832-0626

Record ID: 010025BN
Service Type: RES
Resident Capacity: 20

Resident Capacity: 20 Total Occupancy: 40 Target Population: 1.4

Expiration Date: 7/31/2018 IMS: No

Program Name: EAST BAY COMMUNITY RECOVERY PROJECT - NONRESIDENTIAL

Legal Name: EAST BAY COMMUNITY RECOVERY PROJECT

Address: 2577 SAN PABLO AVENUE City, State Zip: OAKLAND, CA 94612

Phone: (510) 446-7180 Fax: (510) 832-0606

Record ID: 010025CN

Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: HAYWARD OUTPATIENT PROGRAM

Legal Name: EAST BAY COMMUNITY RECOVERY PROJECT

Address: 22971 SUTRO STREET City, State Zip: HAYWARD, CA 94541

Phone: (510) 446-7100 Fax: (510) 446-7191

Record ID: 010025EN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: WISTAR MEN'S R & R PROGRAM, INC.

Legal Name: WISTAR R AND R PROGRAM, INC.

Address: 9735 EMPIRE ROAD City, State Zip: OAKLAND, CA 94603

Phone: (510) 568-9288 Fax: (510) 562-1549

Record ID: 010032EN

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 6/30/2019 IMS: No

Program Name: AXIS COMMUNITY HEALTH CENTER Legal Name: AXIS COMMUNITY HEALTH, INC.

Address: 6666 OWENS DRIVE City, State Zip: PLEASANTON, CA 94588

Phone: (925) 201-6250 Fax: (925) 417-1503

Record ID: 010046BN
Service Type: NON
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: SECOND CHANCE (TRI-CITIES), INC.

Legal Name: SECOND CHANCE, INC. Address: 6330 THORNTON AVENUE,

SUITE B

City, State Zip: NEWARK, CA 94560

Phone: (510) 792-4357 Fax: (510) 745-1693

Record ID: 010061AN
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: SECOND CHANCE PHOENIX PROGRAM

Legal Name: SECOND CHANCE, INC. Address: 6330 THORNTON AVENUE,

SUITE A

City, State Zip: NEWARK, CA 94560

Phone: (510) 792-4357 Fax: (510) 745-1670

Record ID: 010061DN

Service Type: NON

Target Population: 1.4

Expiration Date: 5/31/2019 IMS: No

Program Name: SECOND CHANCE, INC.
Legal Name: SECOND CHANCE, INC.
Address: 107 JACKSON STREET
City, State Zip: HAYWARD, CA 94544

Phone: (510) 886-8696 Fax: (510) 745-1693

Record ID: 010061GN

Service Type: NON

Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: FRIENDSHIP HOUSE AMERICAN INDIAN LODGE

Legal Name: THE FRIENDSHIP HOUSE ASSOCIATION OF AMERICAN INDIANS

Address: 1818 38TH AVENUE AND 1815 39TH AVENUE

City, State Zip: OAKLAND, CA 94601

Phone: (510) 535-7100 Fax: (510) 535-3445

Record ID: 010062AN

Service Type: RES
Resident Capacity: 9
Total Occupancy: 20
Target Population: 1.4

Expiration Date: 2/28/2019 IMS: No

Program Name: OPTIONS RECOVERY SERVICES
Legal Name: OPTIONS RECOVERY SERVICES

Address: 1931 CENTER STREET City, State Zip: BERKELEY, CA 94704

Phone: (510) 666-9552 Fax: (510) 666-9909

Record ID: 010066AN

Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: OPTIONS- OAKLAND DRUG FREE OUTPATIENT PROGRAM

Legal Name: OPTIONS RECOVERY SERVICES

Address: 610 16TH STREET,

SUITE 312, 314, 315, 318, AND 319

City, State Zip: OAKLAND, CA 94612-1284

Phone: (510) 836-9900 Fax: (510) 836-9902

Record ID: 010066CN
Service Type: NON
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: MEN ON THE WAY

Legal Name: WOMEN ON THE WAY RECOVERY CENTER

Address: 20424 HAVILAND AVENUE

City, State Zip: HAYWARD, CA 94541

Phone: (510) 276-3661 Fax: (510) 870-1575

Record ID: 010072AN

Service Type: RES
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.2

Expiration Date: 3/31/2018 IMS: No

Program Name: TERRA FIRMA DIVERSION/EDUCATIONAL SERVICES

Legal Name: TERRA FIRMA DIVERSION/EDUCATIONAL SERVICES

Address: 30086 MISSION BOULEVARD

City, State Zip: HAYWARD, CA 94544

Phone: (510) 675-9362 Fax: (510) 675-9468

Record ID: 010079AP

Service Type: NON

Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: MAGNOLIA WOMEN'S RECOVERY PROGRAM

Legal Name: MAGNOLIA WOMEN'S RECOVERY PROGRAMS, INC.

Address: 682 BRIERGATE WAY City, State Zip: HAYWARD, CA 94544

Phone: (510) 487-2910 Fax: (510) 487-2916

Record ID: 010081AN

Service Type: RES
Resident Capacity: 6
Total Occupancy: 12
Target Population: 1.14

Expiration Date: 9/30/2019 IMS: No

Program Name: MAGNOLIA WOMEN'S RECOVERY PROGRAMS, INC.
Legal Name: MAGNOLIA WOMEN'S RECOVERY PROGRAMS, INC.

Address: 3408 ANDOVER STREET City, State Zip: OAKLAND, CA 94606

Phone: (510) 547-1531 Fax: (510) 547-1543

Record ID: 010081CN

Service Type: RES Resident Capacity: 10 Total Occupancy: 20 Target Population: 1.4

Expiration Date: 2/28/2019 IMS: No

Program Name: NATIVE AMERICAN HEALTH CENTER, INC.
Legal Name: NATIVE AMERICAN HEALTH CENTER, INC.

Address: 3124 INTERNATIONAL BOULEVARD,

4TH FLOOR

City, State Zip: OAKLAND, CA 94601

Phone: (510) 434-5421 Fax: (510) 437-9574

Record ID: 010090AN

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: ALAMEDA FAMILY SERVICES Legal Name: ALAMEDA FAMILY SERVICES 2325 CLEMENT AVENUE Address: City, State Zip: ALAMEDA, CA 94501 Phone: (510) 629-6300

Record ID: 010091AN Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: FOUNTAIN RECOVERY

Legal Name: BROTHER AND SISTER PARTNERSHIP

Address: 5053 PAVO COURT City, State Zip: LIVERMORE, CA 94551

Phone: (925) 292-5583 Fax: (925) 292-0296

Record ID: 010095AP Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

FOUNTAIN RECOVERY Program Name:

Legal Name: BROTHER AND SISTER PARTNERSHIP

Address: 4049 1ST STREET,

SUITE 123

City, State Zip: LIVERMORE, CA 94551

Phone: (925) 292-5583 (925) 292-0286 Fax:

Record ID: 010095BP Service Type: NON

Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: CAL-PEP Legal Name: CAL-PEP

2811 ADELINE STREET Address: City, State Zip: OAKLAND, CA 94608

Phone: (510) 874-7850 (510) 874-6775 Fax:

Record ID: 010099AN Service Type: NON

Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: MUJERES CON ESPERANZA/WOMEN'S SERVICES ENHANCEMENT PROGRAM

Legal Name: SOUTHERN ALAMEDA COUNTY COMITE FOR RAZA MENTAL HEALTH

Address: 3315 INTERNATIONAL BOULEVARD

City, State Zip: OAKLAND, CA 94601

Phone: (510) 536-4764 (510) 291-9591 Fax:

Record ID: 010101AN NON Service Type:

Target Population: 1.3

Expiration Date: 10/31/2019 IMS:

Program Name: EL CHANTE RESIDENTIAL HOME

Legal Name: SOUTHERN ALAMEDA COUNTY COMITE FOR RAZA MENTAL HEALTH

Address: 425 VERNON STREET City, State Zip: OAKLAND, CA 94610

Phone: (510) 465-4569 (510) 291-9591 Fax:

Record ID: 010101CN

RES Service Type: Resident Capacity: 2.0 Total Occupancy: 20 Target Population: 1.2

Expiration Date: 10/31/2017 IMS: No

Program Name: LATINO FAMILY SERVICES CENTER
Legal Name: SOUTHERN ALAMEDA COUNTY COMITE FOR RAZA MENTAL HEALTH
Address: 1315 FRUITVALE AVENUE

Address: 1315 FRUITVALE AVENUE City, State Zip: OAKLAND, CA 94601

(510) 536-4760 Fax: (510) 291-9591 Phone:

Record ID: 010101DN

Service Type: NON Target Population: 1.2

Expiration Date: 4/30/2019 IMS: No

City, State Zip: OAKLAND, CA 94608 (510) 923-9600 Phone:

Record ID: 010102AN
Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

As of 11/1/2017 Alpine County

No licensed or certified facilities at this time.

Please check with a neighboring county for services.

As of 11/1/2017

Amador County

Program Name: AMADOR COUNTY BEHAVIORAL HEALTH SERVICES
Legal Name: AMADOR COUNTY BEHAVIORAL HEALTH SERVICES
Address: 10877 CONDUCTOR BOULLEVARD.

Address: 10877 CONDUCTOR BOULEVARD,

SUITE 300

City, State Zip: SUTTER CREEK, CA 95685

Phone: (209) 223-6412 Fax: (209) 223-3460

Record ID: 030001AN

Service Type: NON

Target Population: 1.1

5/31/2019 IMS: No Expiration Date:

As of 11/1/2017

Butte County

Program Name:NORTHERN VALLEY INDIAN HEALTH, INCLegal Name:NORTHERN VALLEY INDIAN HEALTH, INC.

Address: 845 WEST EAST AVENUE City, State Zip: CHICO, CA 95926-2002

Phone: (530) 934-4348 Ext:1267 Fax: (530) 934-7688

Record ID: 040018AN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: ESPLANADE HOUSE OUTPATIENT ALCOHOL AND DRUG PROGRAM

Legal Name: COMMUNITY ACTION AGENCY OF BUTTE COUNTY, INC.

Address: 181 EAST SHASTA AVENUE City, State Zip: CHICO, CA 95973-0523

Phone: (530) 712-2600 Fax: (530) 895-1848

Record ID: 040022AN

Service Type: NON
Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: TRI-COUNTY TREATMENT RESIDENTIAL FACILITY

Legal Name: JULIE CHAPMAN

Address: 2740 ORO DAM BOULEVARD EAST

City, State Zip: OROVILLE, CA 95966

Phone: (530) 533-5272 Fax: (530) 533-5821

Record ID: 040024AP
Service Type: RES
Resident Capacity: 39
Total Occupancy: 39

Target Population: 1.2

Expiration Data: 8/31/2019

Expiration Date: 8/31/2019 IMS: No

Program Name: TRI-COUNTY TREATMENT OUTPATIENT PROGRAM

Legal Name: JULIE CHAPMAN

Address: 1881 ROBINSON STREET,

SUITE E

City, State Zip: OROVILLE, CA 95965

Phone: (530) 533-5272 Fax: (530) 533-5821

Record ID: 040024BP Service Type: NON

Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: THERAPEUTIC SOLUTIONS

1.1

Legal Name: THERAPEUTIC SOLUTIONS PROFESSIONAL CORPORATION

Address: 3255 ESPLANADE City, State Zip: CHICO, CA 95973-0255

Phone: (530) 899-3150 Fax: (530) 899-3160

Record ID: 040030AP
Service Type: NON

Target Population:

Expiration Date: 10/31/2019 IMS: No

Program Name:SKYWAY HOUSE SHASTA RETREATLegal Name:SKYWAY HOUSE, LLCAddress:3105 ESPLANADE City, State Zip: CHICO, CA 95973

Phone: (530) 342-3046 Fax: (530) 342-1756

Record ID: 040033BP

Record ID: 040033BP
Service Type: RES-DETOX

Resident Capacity: 22 Total Occupancy: 22
Target Population: 1.1

Expiration Date: 10/31/2017 IMS:

Program Name: ELIJAH HOUSE RESTORATION CENTER

Legal Name: ELIJAH HOUSE S.L.E Address: 40 & 42 COYOTE MOON

40 & 42 COYOTE MOON TRAIL

City, State Zip: OROVILLE, CA 95966

Phone: (530) 679-0531 Fax: (844) 360-9250

Record ID: 040034AN

Service Type: RES
Resident Capacity: 12
Total Occupancy: 13
Target Population: 1.2
Expiration Date: 12/21/0010

Expiration Date: 12/31/2018 IMS: No

As of 11/1/2017

Calaveras County

Program Name: CHANGING ECHOES

Legal Name: CHANGING ECHOES, INC.
Address: 7632 POOL STATION ROAD
City, State Zip: ANGELS CAMP, CA 95222

Phone: (209) 785-3666

Record ID: 050002AN
Service Type: RES-DETOX

Resident Capacity: 30 Total Occupancy: 30 Target Population: 1.1

Expiration Date: 9/30/2017 IMS: No

Program Name: THE LAKES TREATMENT CENTER

Legal Name: THE LAKES TREATMENT CENTER, INC.

Address: 7260 O'BYRNES FERRY ROAD City, State Zip: COPPEROPOLIS, CA 95228

Phone: (209) 785-8200 Fax: (209) 785-8202

Record ID: 050005AP
Service Type: RES-DETOX

Resident Capacity: 76
Total Occupancy: 80
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: Yes

Program Name: THE LAKES AT BLACK CREEK

Legal Name: THE LAKES TREATMENT CENTER, INC.

Address: 88 SANGUINETTI COURT City, State Zip: COPPEROPOLIS, CA 95228

Phone: (209) 785-2829 Fax: (209) 785-8225

Record ID: 050005BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: Yes

Program Name: TURNING POINT

Legal Name: TURNING POINT OF ARNOLD, LLC

Address: 1194 CEDAR STREET City, State Zip: ARNOLD, CA 95223

Phone: (209) 822-3117 Fax: (209) 890-7246

Record ID: 050006AP
Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1

Expiration Date: 12/31/2019 IMS: No

As of 11/1/2017

Colusa County

Program Name: Legal Name: COUNTY OF COLUSA DEPARTMENT OF BEHAVIORAL HEALTH Legal Name: COUNTY OF COLUSA DEPARTMENT OF BEHAVIORAL HEALTH

Address: 162 EAST CARSON STREET,

SUITE B

City, State Zip: COLUSA, CA 95932-2880

(530) 458-0525 Fax: (530) 458-8028 Phone:

Record ID: 060001FN

Service Type: NON Target Population: 1.1

Expiration Date:

3/31/2018 IMS: No

As of 11/1/2017

Contra Costa County

Program Name: WEST GAADDS
Legal Name: BI-BETT

Address: 3726 BARRETT AVENUE City, State Zip: RICHMOND, CA 94804

Phone: (925) 685-7418 Fax: (958) 685-7005

Record ID: 070001ACN

Service Type: NON Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: DIABLO VALLEY RANCH

Legal Name: BI-BETT

Address: 11540 MARSH CREEK ROAD City, State Zip: CLAYTON, CA 94517 Phone: (925) 672-5700

Record ID: 070001AN
Service Type: RES
Resident Capacity: 58
Total Occupancy: 59
Target Population: 1.2

Expiration Date: 3/31/2018 IMS: No

Program Name: FREDERIC OZANAM CENTER

Legal Name: BI-BETT

Address: 2931 PROSPECT AVENUE City, State Zip: CONCORD, CA 94518

Phone: (925) 676-4840 Fax: (925) 676-1315

Record ID: 070001BN
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 10/31/2018 IMS: No

Program Name: PUEBLOS DEL SOL

Legal Name: BI-BETT

Address: 2090 COMMERCE AVENUE City, State Zip: CONCORD, CA 94520 Phone: (925) 798-7250

Record ID: 070001CN
Service Type: RES-DETOX

Resident Capacity: 20 Total Occupancy: 20 Target Population: 1.2

Expiration Date: 4/30/2018 IMS: No

Program Name: SERENITY HOUSE

Legal Name: BI-BETT

Address: 11440 MARSH CREEK ROAD
City, State Zip: CLAYTON, CA 94517
Phone: (925) 672-5700
Record ID: 070001DN

Record ID: 07000
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 3/31/2018 IMS: No

Program Name: OAKNOLLS
Legal Name: BI-BETT

Address: 11460 MARSH CREEK ROAD City, State Zip: CLAYTON, CA 94517

Phone: (925) 672-5700

Record ID: 070001JN
Service Type: RES
Resident Capacity: 5
Total Occupancy: 5
Target Population: 1.2

Expiration Date: 3/31/2018 IMS: No

Program Name: FREDERIC OZANAM CENTER - CRYSTAL PALACE

Legal Name: BI-BETT

Address: 1390 SANTA CLARA AVENUE City, State Zip: CONCORD, CA 94518-1025

Phone: (925) 676-4840

Record ID: 070001KN
Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.3

Expiration Date: 10/31/2018 IMS: No

Program Name: FREDERIC OZANAM CENTER--RAINBOW VILLAGE

Legal Name: BI-BETT

Address: 2901 PROSPECT AVENUE City, State Zip: CONCORD, CA 94518

Phone: (925) 676-4840 Fax: (925) 676-1315

Record ID: 070001LN

Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.3

Expiration Date: 10/31/2018 IMS: No

Program Name: FREDERIC OZANAM CENTER--EMERALD CITY

Legal Name: BI-BETT

Address: 2950 PROSPECT AVENUE
City, State Zip: CONCORD, CA 94518
Phone: (925) 676-4840

Record ID: 070001NN
Service Type: RES
Resident Capacity: 5
Total Occupancy: 5
Target Population: 1.3

Expiration Date: 10/31/2018 IMS: No

Program Name: EAST COUNTY COMMUNITY WOMEN'S CENTER

Legal Name: BI-BETT

Address: 2, 4, 12 AND 14 DAVI AVENUE

City, State Zip: PITTSBURG, CA 94565
Phone: (925) 427-1384

Record ID: 070001RN
Service Type: RES-DETOX

Resident Capacity: 15 Total Occupancy: 15 Target Population: 1.3

Expiration Date: 12/31/2018 IMS: No

Program Name: EAST COUNTY WOLLAM

Legal Name: BI-BETT

Address: 22 DAVI AVENUE
City, State Zip: PITTSBURG, CA 94565
Phone: (925) 427-1384

Record ID: 070001SN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.4

Expiration Date: 12/31/2018 IMS: No

EAST COUNTY WOLLAM Program Name:

Legal Name: BI-BETT

Address: 32 DAVI AVENUE

City, State Zip: PITTSBURG, CA 94565

Phone: (925) 427-1384 Fax: (925) 458-8996

Record ID: 070001TN

Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.4

Expiration Date: 12/31/2018 IMS: No

Program Name: EAST COUNTY GAADDS/ACFF

Legal Name: BI-BETT

Address: 1251 CALIFORNIA STREET,

SUITE 600

PITTSBURG, CA 94565 City, State Zip:

Phone: (925) 439-5161 Fax: (925) 439-0322

Record ID: 070001UN Service Type: NON Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: EAST COUNTY WOLLAM

Legal Name: BI-BETT

Address: 34 DAVI AVENUE

City, State Zip: PITTSBURG, CA 94565

Phone: (925) 427-1384 Fax: (925) 458-8996

Record ID: 070001VN

Service Type: RES Resident Capacity: Total Occupancy: 6 Target Population: 1.4

Expiration Date: 4/30/2018 IMS: No

GAADDS CENTRAL/ACFF Program Name:

Legal Name: BI-BETT

Address: 2290 DIAMOND BOULEVARD,

SUITE 202

City, State Zip: CONCORD, CA 94520

Phone: (925) 685-7418 Fax: (925) 685-7005

Record ID: 070001XN

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2019 TMS: No

Program Name: EAST COUNTY WOLLAM

Legal Name: BI-BETT

Address: 24 DAVI AVENUE City, State Zip: PITTSBURG, CA 94565

(925) 427-1384 Fax: (925) 427-4217 Phone:

Record ID: 070001ZN

Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

2/28/2019 Expiration Date: IMS: No

Program Name: BRIGHT HEART HEALTH

BRIGHT HEART HEALTH, INC. Legal Name:

Address: 2603 CAMINO RAMON,

SUITE 200

City, State Zip: SAN RAMON, CA 94583

Phone: (844) 884-4474 Fax: (415) 458-2691

Record ID: 070003AP

Service Type: NON Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No Program Name: THE RECTORY WOMEN'S RECOVERY CENTER

Legal Name: UJIMA FAMILY RECOVERY SERVICES

Address: 1901 CHURCH LANE City, State Zip: SAN PABLO, CA 94806

Phone: (510) 236-3134 Fax: (510) 236-3151

Record ID: 070008AN

Service Type: RES Resident Capacity: 12 Total Occupancy: 21 Target Population: 1.4

Expiration Date: 2/28/2019 IMS: No

Program Name: LA CASA UJIMA

Legal Name: UJIMA FAMILY RECOVERY SERVICES

Address: 904 MELLUS STREET City, State Zip: MARTINEZ, CA 94553

Phone: (925) 229-0230 Fax: (925) 229-0233

Record ID: 070008BN

Service Type: RES Resident Capacity: 12 Total Occupancy: 18 Target Population: 1.4

Expiration Date: 2/28/2019 IMS: No

Program Name: UJIMA WEST OUTPATIENT TREATMENT PROGRAM

Legal Name: UJIMA FAMILY RECOVERY SERVICES

Address: 12960 SAN PABLO AVENUE City, State Zip: RICHMOND, CA 94805

Phone: (510) 215-2280 Fax: (925) 215-2283

Record ID: 070008CN
Service Type: NON
Target Population: 1.3

Expiration Date: 2/28/2019 IMS: No

Program Name: LA CASA UJIMA

Legal Name: UJIMA FAMILY RECOVERY SERVICES

Address: 919 MELLUS STREET City, State Zip: MARTINEZ, CA 94553

Phone: (925) 229-0230 Fax: (925) 229-0233

Record ID: 070008DN

Service Type: RES
Resident Capacity: 3
Total Occupancy: 6
Target Population: 1.4

Expiration Date: 2/28/2019 IMS: No

Program Name: UJIMA EAST INTENSIVE DAY TREATMENT PROGRAM

Legal Name: UJIMA FAMILY RECOVERY SERVICES

Address: 180 EAST LELAND ROAD,

SUITES A & B

City, State Zip: PITTSBURG, CA 94565

Phone: (925) 427-9100 Fax: (925) 427-9102

Record ID: 070008EN

Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: THE RECTORY WOMEN'S RECOVERY CENTER

Legal Name: UJIMA FAMILY RECOVERY SERVICES

Address: 1916 CHURCH LANE City, State Zip: SAN PABLO, CA 94806

Phone: (510) 236-3134 Fax: (510) 236-3151

Record ID: 070008HN

Service Type: RES
Resident Capacity: 3
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: DISCOVERY HOUSE

Legal Name: CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT

Address: 4645 PACHECO BOULEVARD City, State Zip: MARTINEZ, CA 94553 Phone: (925) 646-9270

Record ID: 070012BN
Service Type: RES
Resident Capacity: 40
Total Occupancy: 40
Target Population: 1.2

Expiration Date: 10/31/2017 IMS: No

Program Name: CROSSROADS TREATMENT CENTER

Legal Name: RECOVERY MANAGEMENT SERVICES, INC.

Address: 2449 PACHECO STREET & 2118 EAST STREET

City, State Zip: CONCORD, CA 94520

Phone: (925) 682-5704 Fax: (925) 685-7835

Record ID: 070018CN
Service Type: RES-DETOX

Resident Capacity: 19 Total Occupancy: 21 Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: CROSSROADS TREATMENT CENTER

Legal Name: RECOVERY MANAGEMENT SERVICES, INC.

Address: 2449 PACHECO STREET City, State Zip: CONCORD, CA 94520

Phone: (925) 682-5704 Fax: (925) 685-7835

Record ID: 070018LN
Service Type: NON
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: REACH PROJECT

Legal Name: R.E.A.C.H. PROJECT Address: 1915 D STREET City, State Zip: ANTIOCH, CA 94509 Phone: (925) 754-3673 Record ID: 070024AN

Record ID: 07002
Service Type: NON
Target Population: 1.7

Expiration Date: 6/30/2019 IMS: No

Program Name: REACH PROJECT
Legal Name: R.E.A.C.H. PROJECT

Address: 3385 MAIN STREET, SUITE B

City, State Zip: OAKLEY, CA 94561 Phone: (925) 754-3673

Record ID: 070024CN
Service Type: NON
Target Population: 1.5

Expiration Date: 5/31/2018 IMS: No

Program Name:R.E.A.C.H. PROJECTLegal Name:R.E.A.C.H. PROJECTAddress:101 SANDCREEK ROAD

SUITE B

City, State Zip: BRENTWOOD, CA 94513-2057

Phone: (925) 666-8460 Fax: (925) 754-2002

Record ID: 070024DN

Service Type: NON
Target Population: 1.10

Expiration Date: 2/28/2019 IMS: No

Program Name: COLE HOUSE

Legal Name: J. COLE RECOVERY HOMES, INC.

1408 A STREET Address: City, State Zip: ANTIOCH, CA 94509

Phone: (925) 978-2873 Fax: (925) 757-0411

Record ID: 070034AP Service Type: RES Resident Capacity: 16 Total Occupancy: 17 Target Population: 1.2

Expiration Date: 3/31/2018 IMS: No

Program Name: STEP/AHEAD ADOLESCENT OUTPATIENT DRUG TREATMENT PROGRAM

Legal Name: COMMUNITY HEALTH FOR ASIAN AMERICANS

Address: 207 37TH STREET City, State Zip: RICHMOND, CA 94805

Phone: (510) 233-7555 (510) 233-4545 Fax:

Record ID: 070041AN Service Type: NON Target Population: 1.5

Expiration Date: 12/31/2017 IMS:

RICHMOND HIGH SCHOOL-OATS PROGRAM Program Name:

Legal Name: COMMUNITY HEALTH FOR ASIAN AMERICANS

Address: 1250 23RD STREET City, State Zip: RICHMOND, CA 94804 Phone: (510) 237-8770

Record ID: 070041BN Service Type: NON Target Population: 1.10

Expiration Date: 3/31/2018 IMS:

GATEWAY ALCOHOL AND DRUG SERVICES Program Name: Legal Name: BAY AREA COMMUNITY RESOURCES, INC.

Address: 13201 SAN PABLO AVENUE,

SUITE 206

SAN PABLO, CA 94806 City, State Zip:

Phone: (510) 235-2887 (510) 235-2563 Fax:

Record ID: 070043AN Service Type: NON

Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

GMG BEHAVIORAL HEALTH SERVICES Program Name:

Legal Name: RICHARD I. GRACER, M.D., A PROFESSIONAL CORPORATION

Address: 4 CROW CANYON COURT,

SUITE 210

City, State Zip: SAN RAMON, CA 94583

Phone: (925) 277-1100 Fax: (925) 277-1358

Record ID: 070044AP

Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: DIABLO VALLEY DRUG AND ALCOHOL SERVICES

DIABLO VALLEY DRUG AND ALCOHOL SERVICES INC. Legal Name:

100 PARK PLACE, Address: SUITE 120B

City, State Zip: SAN RAMON, CA 94583

Phone: (925) 289-1430 Fax: (925) 277-1557

Record ID: 070046AP Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

NEW DIRECTIONS FOR YOUNG ADULTS CA, INC. Program Name: NEW DIRECTIONS FOR YOUNG ADULTS CA, INC. Legal Name:

Address: 100 LONGBROOK WAY

RECORD TO HILL, CA 94523

(866) 611-5450 Ext:231 Fax: (866) 203-0007

Record ID: 070047AP

Service Type: NON

Target Population

Target Population: 1.1

3/31/2018 Expiration Date: IMS: No

As of 11/1/2017

Del Norte County

DEL NORTE HEALTH AND HUMAN SERVICES/ALCOHOL AND OTHER DRUG PROGRAMS

Program Name:
Legal Name: DEL NORTE COUNTY HEALTH AND HUMAN SERVICES

Address: 1279 2ND STREET,

SUITE C

City, State Zip: CRESCENT CITY, CA 95531

Phone: (707) 464-4813 Fax: (707) 465-1442

Record ID: 080003AN

Service Type: NON

Target Population: 1.1

10/31/2019 IMS: Expiration Date: No

As of 11/1/2017

El Dorado County

Program Name: PROGRESS HOUSE MEN'S FACILITY

Legal Name: PROGRESS HOUSE, INC. Address: 838 BEACH COURT ROAD City, State Zip: COLOMA, CA 95613 Phone: (530) 626-7252

Record ID: 090002AN
Service Type: RES
Resident Capacity: 28
Total Occupancy: 28
Target Population: 1.2

Expiration Date: 5/31/2018 IMS: No

Program Name: PROGRESS HOUSE WOMEN AND CHILDREN'S FACILITY

Legal Name: PROGRESS HOUSE, INC.
Address: 5607 MOUNT MURPHY ROAD
City, State Zip: GARDEN VALLEY, CA 95633

Phone: (530) 333-9460 Fax: (530) 333-1019

Record ID: 090002BN

Service Type: RES
Resident Capacity: 20
Total Occupancy: 32
Target Population: 1.4

Expiration Date: 5/31/2018 IMS: No

Program Name: PROGRESS HOUSE OUTPATIENT SERVICES

Legal Name: PROGRESS HOUSE, INC.
Address: 2844 COLOMA STREET
City, State Zip: PLACERVILLE, CA 95667

Phone: (530) 642-1715

Record ID: 090002CN
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: PROGRESS HOUSE PERINATAL FACILITY

Legal Name: PROGRESS HOUSE, INC.
Address: 5494 PONY EXPRESS TRAIL,
HOUSE 1, 2, 3, 4 AND 5

City, State Zip: CAMINO, CA 95709

Phone: (530) 644-3758 Fax: (530) 644-3782

Record ID: 090002FN
Service Type: RES

Resident Capacity: 16 Total Occupancy: 32 Target Population: 1.4

Expiration Date: 5/31/2018 IMS: No

Program Name: PROGRESS HOUSE INC DETOX CENTER

Legal Name: PROGRESS HOUSE, INC. Address: 2986 COLOMA STREET

City, State Zip: PLACERVILLE, CA 95667-8828

Phone: (530) 626-9240 Fax: (530) 626-8992

Record ID: 090002JN
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.2

Expiration Date: 4/30/2018 IMS: No

Program Name: NEW MORNING YOUTH AND FAMILY SERVICES

Legal Name: NEW MORNING YOUTH AND FAMILY SERVICES, INC.

Address: 6765 GREEN VALLEY ROAD City, State Zip: PLACERVILLE, CA 95667-8984

Phone: (530) 622-5551 Fax: (530) 622-5800

Record ID: 090005AN Service Type: NON

Target Population: 1.5

Expiration Date: 12/31/2018 IMS: No

Program Name: TAHOE YOUTH AND FAMILY SERVICES
Legal Name: TAHOE YOUTH AND FAMILY SERVICES

Address: 1021 FREMONT AVENUE

City, State Zip: SOUTH LAKE TAHOE, CA 96150-8136

Phone: (530) 541-2445

Record ID: 090006AN
Service Type: NON
Target Population: 1.5

Expiration Date: 2/28/2019 IMS: No

Program Name: EDCA LIFESKILLS
Legal Name: EDCA LIFESKILLS
Address: 893 SPRING STREET

City, State Zip: PLACERVILLE, CA 95667-4437

Phone: (530) 622-8193 Fax: (530) 622-4017

Record ID: 090009AN

Service Type: NON Target Population: 1.1

Expiration Date: 11/30/2019 IMS: No

Program Name: TAHOE TURNING POINT Legal Name: TAHOE TURNING POINT

Address: 2494 LAKE TAHOE BOULEVARD,

SUITES B1, B2, AND B5

City, State Zip: SOUTH LAKE TAHOE, CA 96150-7142

Phone: (530) 541-4594 Fax: (530) 577-5323

Record ID: 090014DN Service Type: NON

Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: ELEVATE ADDICTION SERVICES - PLACERVILLE

Legal Name: HALCYON HORIZONS, INCORPORATED

Address: 1364 RUTHHAVEN ROAD City, State Zip: PLACERVILLE, CA 95667

Phone: (530) 295-5550 Fax: (530) 295-5551

Record ID: 090018AN

Service Type: RES
Resident Capacity: 24
Total Occupancy: 27
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: ELEVATE ADDICTION SERVICES - SOUTH LAKE TAHOE

Legal Name: HALCYON HORIZONS, INCORPORATED

Address: 586 GLORENE AVENUE

City, State Zip: SOUTH LAKE TAHOE, CA 96150-3907

Phone: (800) 556-8885

Record ID: 090018CN
Service Type: RES-DETOX

Resident Capacity: 70 Total Occupancy: 75 Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name:
Legal Name:
ANOTHER CHOICE ANOTHER CHANCE EL DORADO HILLS
Address:
City, State Zip:
Phone:
(916) 509-5919 Fax: (916) 817-1384

Record ID:
Service Type:
RES
Pasident Capacity:
5

Resident Capacity: 5
Total Occupancy: 5
Target Population: 1.1
Expiration Date: 6/30/2018 IMS: No

As of 11/1/2017

Fresno County

Program Name: COMPREHENSIVE ADDICTION PROGRAMS, INC.

Legal Name: COMPREHENSIVE ADDICTION PROGRAMS, INCORPORATED

Address: 2445 WEST WHITESBRIDGE ROAD

City, State Zip: FRESNO, CA 93706 Phone: (559) 264-5096

Record ID: 100003AN
Service Type: RES-DETOX

Resident Capacity: 65
Total Occupancy: 65
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: NUESTRA CASA RECOVERY HOME

Legal Name: FRESNO COUNTY HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES, INC.

Address: 1414 WEST KEARNEY BOULEVARD

City, State Zip: FRESNO, CA 93706

Phone: (559) 485-0501 Fax: (559) 485-1313

Record ID: 100006AN

Service Type: RES
Resident Capacity: 16
Total Occupancy: 18
Target Population: 1.2

Expiration Date: 2/28/2018 IMS: No

Program Name: TURTLE LODGE

Legal Name: SIERRA TRIBAL CONSORTIUM, INC.

Address: 610 WEST MCKINLEY AVENUE

City, State Zip: FRESNO, CA 93728 Phone: (559) 445-2691

Record ID: 100007AN
Service Type: RES-DETOX

Resident Capacity: 22
Total Occupancy: 37
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: WESTCARE CALIFORNIA

Legal Name: WESTCARE CALIFORNIA, INC.

Address: 2772 SOUTH MARTIN LUTHER KING BOULEVARD

City, State Zip: FRESNO, CA 93706

Phone: (559) 265-4800 Fax: (559) 265-4808

Record ID: 100010FN
Service Type: RES-DETOX
Resident Capacity: 215
Total Occupancy: 265
Target Population: 1.1

Expiration Date: 1/31/2020 IMS: No

Program Name: WESTCARE CALIFORNIA, INC. Legal Name: WESTCARE CALIFORNIA, INC.

Address: 611 EAST BELMONT City, State Zip: FRESNO, CA 93701

Phone: (559) 237-3420 Fax: (559) 213-1935

Record ID: 100010IN

Service Type: NON Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: KING OF KINGS MEN'S RECOVERY HOME Legal Name: THE KING OF KINGS COMMUNITY CENTER

Address: 2267 SOUTH GENEVA AVENUE

City, State Zip: FRESNO, CA 93706 Phone: (559) 266-6449 100024AN

Record ID: RES Service Type: Resident Capacity: 10 Total Occupancy: 10 Target Population: 1.2

Expiration Date: 6/30/2018 IMS: No

Program Name: KING OF KINGS OUTPATIENT AND PERINATAL SERVICES PROGRAM

Legal Name: THE KING OF KINGS COMMUNITY CENTER Address: 2302 MARTIN LUTHER KING BOULEVARD

City, State Zip: FRESNO, CA 93706-4135

Phone: (559) 268-9559 Fax: (559) 268-9559

Record ID: 100024BN Service Type: NON Target Population: 1.3

Expiration Date: 6/30/2018 IMS: No

Program Name: THE AVANTI PROGRAM

Legal Name: KINGS VIEW

Address: 1822 JENSEN AVENUE,

SUITE 102

City, State Zip: SANGER, CA 93657 Phone: (559) 875-6300

Record ID: 100026AN

Service Type: NON

Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: QUEST HOUSE

Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC.

Address: 2731 WEST OLIVE AVENUE

City, State Zip: FRESNO, CA 93728

Phone: (559) 233-5096 (559) 233-5099 Fax:

Record ID: 100028EN

Service Type: RES Resident Capacity: 30 Total Occupancy: 30 Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: FIRST STREET CENTER OUTPATIENT PROGRAM

TURNING POINT OF CENTRAL CALIFORNIA, INC. Legal Name:

Address: 3636 NORTH FIRST STREET,

SUITE 135

FRESNO, CA 93726-6818 City, State Zip:

(559) 225-1464 Phone:

Record ID: 100028HN Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: SPIRIT OF WOMAN OF CALIFORNIA

Legal Name: SPIRIT OF WOMAN OF CALIFORNIA, INC.

Address: 327 WEST BELMONT AVENUE

City, State Zip: FRESNO, CA 93728

(559) 233-4353 Phone: Record ID: 100036AN

Service Type: RES Resident Capacity: 63 Total Occupancy: 208 Target Population: 1.14

Expiration Date: 3/31/2018 IMS: No

FRESNO NEW CONNECTION, INC. Program Name: Legal Name: FRESNO NEW CONNECTION, INC. 4411 NORTH CEDAR AVENUE, Address:

SUITE 108

City, State Zip: FRESNO, CA 93726

Phone: (559) 248-1548 Fax: (559) 248-1530

Record ID: 100039AN Service Type: NON Target Population: 1.1

11/30/2018 IMS: Expiration Date: No

Program Name: FRESNO FIRST

Legal Name: MENTAL HEALTH SYSTEMS, INC. Address: 2550 WEST CLINTON AVENUE City, State Zip: FRESNO, CA 93705-4201

Phone: (858) 573-2600 (559) 441-0354 Fax:

Record ID: 100042CN Service Type: RES Resident Capacity: 60 Total Occupancy: 85 Target Population: 1.3

Expiration Date: 9/30/2018 IMS: No

Program Name: FAMILY & YOUTH ALTERNATIVES Legal Name: MENTAL HEALTH SYSTEMS, INC. Address: 3122 NORTH MILLBROOK AVENUE,

SUITE A

FRESNO, CA 93703 City, State Zip:

Phone: (858) 573-2600 Fax: (559) 600-4876

Record ID: 100042DN Service Type: NON Target Population: 1.1

4/30/2018 IMS: Expiration Date: No

Program Name: FLOYD FARROW SUBSTANCE ABUSE UNIT

Legal Name: MENTAL HEALTH SYSTEMS, INC. Address: 3333 EAST AMERICAN AVENUE, BUILDING 707 AND 709

FRESNO, CA 93725 City, State Zip:

Phone: (559) 600-4876 Fax: (559) 495-3650

Record ID: 100042EN Service Type: NON

Target Population: 1.1

Expiration Date: 7/31/2018 IMS:

Program Name: VISIONS FOR YOUTH

Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 4939 E. YALE AVENUE City, State Zip: FRESNO, CA 93727

Phone: (559) 977-1931 (559) 225-9174 Fax:

Record ID: 100042FN Service Type: NON

Target Population: 1.1

1/31/2020 Expiration Date: IMS: No

PROMESA BEHAVIORIAL HEALTH OUTPATIENT DRUG AND ALCOHOL PROGRAM Program Name:

No

PROMESA BEHAVIORIAL HEALTH Legal Name: Address: 7120 N. MARKS AVENUE,

SUITE 110

FRESNO, CA 93711 City, State Zip:

(559) 981-5534 (559) 320-5893 Phone: Fax:

Record ID: 100043BN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No Program Name: PANACEA SERVICES, INC. - COMPREHENSIVE DRUG AND ALCOHOL TREATMENT (CDAT)

Legal Name: PANACEA SERVICES, INC. Address: 3152 NORTH MILLBROOK,

SUITES D AND E

City, State Zip: FRESNO, CA 93703 Phone: (559) 241-0364 Fax: (559) 241-0342

Record ID: 100052CP
Service Type: NON
Target Population: 1.5

Expiration Date: 1/31/2019 IMS: No

Program Name:EMINENCE HEALTHCARE, INC.Legal Name:EMINENCE HEALTHCARE, INC.Address:740 WEST NORTH AVENUE,

ANNEX 1 AND 5A1 City, State Zip: REEDLEY, CA 93654

Phone: (559) 917-1635 Fax: (559) 221-8101

Record ID: 100063DP
Service Type: NON
Target Population: 1.5

Expiration Date: 3/31/2018 IMS: No

Program Name: UNIVERSAL HEALTH NETWORK AND SYSTEMS, INC. Legal Name: UNIVERSAL HEALTH NETWORK AND SYSTEMS, INC.

Address: 3170 NORTH CHESTNUT AVENUE,

SUITE 105

City, State Zip: FRESNO, CA 93703

Phone: (559) 252-5150 Fax: (559) 252-5156

Record ID: 100066AP
Service Type: NON

Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: UNIVERSAL HEALTH NETWORK AND SYSTEMS, INC. Legal Name: UNIVERSAL HEALTH NETWORK AND SYSTEMS, INC.

Address: 625 AND 627 EAST KEATS AVENUE

City, State Zip: FRESNO, CA 93710-7000

Phone: (559) 252-5150 Fax: (559) 252-5156

Record ID: 100066BP
Service Type: RES-DETOX

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.9

Expiration Date: 5/31/2019 IMS: No

Program Name: HERNDON RECOVERY CENTER
Legal Name: SATNAM S. ATWAL, MD

Address: 7055 NORTH CHESTNUT AVENUE,

SUITE 101

City, State Zip: FRESNO, CA 93720

Phone: (559) 298-5111 Fax: (559) 298-3111

Record ID: 100074AP

Service Type: NON Target Population: 1.5

Expiration Date: 2/28/2018 IMS: No

Program Name: HERNDON RECOVERY CENTER RESIDENTIAL

Legal Name: SATNAM S. ATWAL, MD Address: 2631 EAST JORDAN AVENUE

City, State Zip: FRESNO, CA 93720

Phone: (559) 298-5111 Fax: (559) 298-3111

Record ID: 100074BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: HERNDON RECOVERY CENTER
Legal Name: SATNAM S. ATWAL, MD
Address: 7361 NO. SIERRA VISTA
City, State Zip: FRESNO, CA 93720

Phone: (559) 298-5111 Fax: (559) 298-3111

Record ID: 100074CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name:TOUCHSTONE RECOVERY CENTERLegal Name:RICHARD V. GUZZETTA, M.D.Address:724 MEDICAL CENTER DRIVE EAST,

SUITE 103

City, State Zip: CLOVIS, CA 93611

Phone: (559) 298-6711 Fax: (559) 298-6609

Record ID: 100076AP
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: PATHWAYS TO RECOVERY

Legal Name: FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

Address: 515 SOUTH CEDAR AVENUE City, State Zip: FRESNO, CA 93702

Phone: (559) 600-6068 Fax: (559) 453-8916

Record ID: 100081AN

Service Type: NON

Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: DELTA CARE, INC. Legal Name: DELTA CARE, INC.

Address: 4705 NORTH SONORA AVENUE,

SUITE 113A

City, State Zip: FRESNO, CA 93722
Phone: (559) 289-6785
Record ID: 100082AN

Record ID: 1000 Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: CENTRAL CALIFORNIA RECOVERY, INC.

Legal Name: CENTRAL CALIFORNIA RECOVERY, INCORPORATED

Address: 1204 WEST SHAW AVENUE,

SUITE 102

City, State Zip: FRESNO, CA 93711-3708

Phone: (559) 681-1947 Fax: (559) 486-6294

Record ID: 100087AN Service Type: NON

Target Population: 1.5

Expiration Date: 12/31/2018 IMS: No

Program Name: DUNAMIS INC., GROUP HOME
Legal Name: DUNAMIS, INC. GROUP HOME
Address: 4991 EAST MCKINLEY AVENUE,

SUITE 112 AND 113 FRESNO. CA 93727

City, State Zip: FRESNO, CA 93727 Phone: (281) 782-5887

Record ID: 100091AN
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: ASI COUNSELING AND PROFESSIONAL SERVICES, INC.
Legal Name: ASI COUNSELING AND PROFESSIONAL SERVICES, INC.

Address: 2005 NORTH WISHON AVENUE

City, State Zip: FRESNO, CA 93704 Phone: (559) 499-1011

Record ID: 100092AP
Service Type: NON
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: TRANSITIONS CHILDRENS SERVICES: OUTPATIENT & CONTINUING CARE SERVICES

Legal Name: TRANSITIONS CHILDREN'S SERVICES

Address: 1945 N. HELM AVENUE,

SUITE 101

City, State Zip: FRESNO, CA 93727

Phone: (559) 222-5437 Fax: (559) 222-5445

Record ID: 100093AN
Service Type: NON
Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: FIRST STEPS RECOVERY
Legal Name: TRUE NORTH DETOX, LLC

Address: 21877 AND 22051 OAK HILL LANE

City, State Zip: CLOVIS, CA 93619

Phone: (559) 299-5100 Fax: (360) 323-7285

Record ID: 100094AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: THE LIVING CENTER OF FRESNO, INC. Legal Name: THE LIVING CENTERS OF FRESNO, INC.

Address: 4576 E. SHIELDS AVENUE

City, State Zip: FRESNO, CA 93726 Phone: (831) 345-5024

Record ID: 100095AP
Service Type: RES-DETOX

Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

As of 11/1/2017

Glenn County

GLENN COUNTY SUBSTANCE ABUSE PROGRAM

GLENN COUNTY HEALTH SERVICES

Program Name: Legal Name: Address: 1187 EAST SOUTH STREET City, State Zip: ORLAND, CA 95963-1640

(530) 865-1146 Fax: (530) 934-6592 Phone:

Record ID: 110001AN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: Legal Name: Address: NORTHERN VALLEY INDIAN HEALTH, INC. NORTHERN VALLEY INDIAN HEALTH, INC.

207 NORTH BUTTE STREET

City, State Zip: WILLOWS, CA 95988

Phone: (530) 934-4641 Fax: (530) 934-7688

Record ID: 110002AN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

As of 11/1/2017

Humboldt County

Program Name: HUMBOLDT RECOVERY CENTER

Legal Name: HUMBOLDT RECOVERY CENTER, INCORPORATED

Address: 1303 11TH STREET AND

1024 N STREET
City, State Zip: EUREKA, CA 95501

Phone: (707) 443-4237

Record ID: 120001AN

Service Type: RES
Resident Capacity: 20
Total Occupancy: 22

Target Population: 1.2

Expiration Date: 10/31/2019 IMS: No

Program Name: HUMBOLDT RECOVERY CENTER

Legal Name: HUMBOLDT RECOVERY CENTER, INCORPORATED

Address: 905 L STREET, AND

1116 AND 1120 9TH STREET

City, State Zip: EUREKA, CA 95502

Phone: (707) 443-0514 Fax: (707) 443-0514

Record ID: 120001BN

Service Type: RES
Resident Capacity: 21
Total Occupancy: 23
Target Population: 1.2

Expiration Date: 1/31/2019 IMS: No

Program Name: HUMBOLDT RECOVERY CENTER

Legal Name: HUMBOLDT RECOVERY CENTER, INCORPORATED

Address: 944 N STREET AND 1219 10TH STREET

City, State Zip: EUREKA, CA 95501

Phone: (707) 443-4237 Fax: (707) 442-1191

Record ID: 120001DN

Service Type: RES Resident Capacity: 16 Total Occupancy: 18 Target Population: 1.3

Expiration Date: 2/28/2019 IMS: No

Program Name: CROSSROADS

Legal Name: NORTH COAST SUBSTANCE ABUSE COUNCIL

Address: 1205 AND 1210 MYRTLE AVENUE

City, State Zip: EUREKA, CA 95501

Phone: (707) 445-0869 Fax: (707) 445-0826

Record ID: 120005AN

Service Type: RES
Resident Capacity: 22
Total Occupancy: 22
Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name:SINGING TREES RECOVERY CENTERLegal Name:SINGING TREES RECOVERY CENTER

Address: 2061 HIGHWAY 101 City, State Zip: GARBERVILLE, CA 95542

Phone: (707) 247-3495 Fax: (707) 247-3334

Record ID: 120008AP
Service Type: RES-DETOX

Resident Capacity: 20 Total Occupancy: 23 Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: WATERFRONT RECOVERY SERVICES
Legal Name: ALCOHOL/DRUG CARE SERVICE'S, INC.

Address: 2413 2ND STREET
City, State Zip: EUREKA, CA 95501
Phone: (707) 445-1391

Record ID: 120009AN Service Type: RES-DETOX

Resident Capacity: 56
Total Occupancy: 56
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: Yes

Program Name: ADCS WOMEN'S RESIDENTIAL TREATMENT PROGRAM

Legal Name: ALCOHOL/DRUG CARE SERVICE'S, INC.

Address: 1742 J STREET City, State Zip: EUREKA, CA 95501

Phone: (707) 444-2232 Fax: () -

Record ID: 120009CN

Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.12

Expiration Date: 3/31/2018 IMS: No

Program Name: HUMBOLDT COUNTY PROGRAMS FOR RECOVERY

Legal Name: HUMBOLDT COUNTY ALCOHOL AND OTHER DRUG PROGRAMS

Address: 720 WOOD STREET,

ROOMS 112, 115, 116, 117, 118, 119, 121, 123, 127, 128, 130 AND 734

City, State Zip: EUREKA, CA 95501

Phone: (707) 476-4054 Fax: (707) 446-3776

Record ID: 120010AN Service Type: NON

Target Population: 1.1

Expiration Date: 12/31/2019 IMS: No

Program Name: HEALTHY MOMS PROGRAM

Legal Name: HUMBOLDT COUNTY ALCOHOL & OTHER DRUG PROGRAMS

Address: 2910 H STREET
City, State Zip: EUREKA, CA 95501
Phone: (707) 441-5220
Record ID: 120011AN

Record ID: 1200: Service Type: NON Target Population: 1.3

Expiration Date: 9/30/2019 IMS: No

Program Name: UNITED INDIAN HEALTH SERVICES, INC.-CHILD & FAMILY SERVICES DEPT.

Legal Name: UNITED INDIAN HEALTH SERVICES, INC.

Address: 1600 WEEOT WAY City, State Zip: ARCATA, CA 95521

Phone: (707) 825-5060 Fax: (707) 825-6753

Record ID: 120015AN

Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

As of 10/1/2017

Imperial County

No licensed or certified facilities at this time.

Please check with a neighboring county for services.

As of 11/1/2017

Inyo County

ALPINE RECOVERY CENTER

Program Name: ALPINE RECOVERY Control Legal Name: ROBERT B. DIBBLE Address: 375 EAST LINE STR 375 EAST LINE STREET City, State Zip: BISHOP, CA 93514 Phone: (760) 873-4357 140001AP

Record ID: Service Type: NON Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: INYO COUNTY

Legal Name: INYO COUNTY HEALTH AND HUMAN SERVICES

Address: 162 GROVE STREET

City, State Zip: BISHOP, CA 93514

Phone: (760) 873-6533 Fax: (760) 873-3277

Record ID: 140002AN Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

As of 11/1/2017

Kern County

Program Name: KCHC OUTPATIENT RECOVERY SERVICES

Legal Name: KERN COUNTY HISPANIC COMMISSION ON ALCOHOL

AND DRUG ABUSE SERVICES, INC.

Address: 1400 EASTON DRIVE,

SUITE 151

City, State Zip: BAKERSFIELD, CA 93309

Phone: (661) 634-9877 Fax: (661) 864-0198

Record ID: 150003HN

Service Type: NON
Target Population: 1 1

Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: JASON'S RETREAT/CAPISTRANO COMMUNITY FOR WOMEN

Legal Name: BAKERSFIELD RECOVERY SERVICES INC.

Address: 600 BERNARD STREET AND 2000 BAKER STREET

City, State Zip: BAKERSFIELD, CA 93305

Phone: (661) 325-1817 Fax: (661) 325-3929

Record ID: 150004AN
Service Type: RES-DETOX

Resident Capacity: 54
Total Occupancy: 59
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: CAPISTRANO LINCOLN STREET RETREAT
Legal Name: BAKERSFIELD RECOVERY SERVICES INC.

Address: 708 LINCOLN STREET
City, State Zip: BAKERSFIELD, CA 93305

Phone: (661) 325-1817 Fax: (661) 325-3929

Record ID: 150004GN

Service Type: RES
Resident Capacity: 14
Total Occupancy: 26
Target Population: 1.4

Expiration Date: 9/30/2019 IMS: No

Program Name: BROTHERHOOD CENTER

Legal Name: COMMUNITY SERVICE ORGANIZATION, BEHAVIORAL HEALTH PROGRAMS

Address: 1124 BAKER STREET
City, State Zip: BAKERSFIELD, CA 93305

Phone: (661) 327-9376 Fax: (661) 327-7349

Record ID: 150011BN Service Type: NON

Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: CENTRO DE COLORES

Legal Name: COMMUNITY SERVICE ORGANIZATION, BEHAVIORAL HEALTH PROGRAMS

Address: 10420 MAIN STREET City, State Zip: LAMONT, CA 93241

Phone: (661) 845-3753 Fax: (661) 845-4866

Record ID: 150011CN

Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

KEN KENNEMER SUBSTANCE ABUSE TREATMENT CENTER Program Name:

Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC.

Address: 1100 UNION AVENUE City, State Zip: BAKERSFIELD, CA 93307

Phone: (661) 861-6111 Fax: (661) 861-6161

Record ID: 150013BN

Service Type: RES Resident Capacity: 100 Total Occupancy: 100 Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: THE NAPD GENESIS PROGRAM (NEW ADVANCES FOR PEOPLE WITH DISABILITIES)

Legal Name: NEW ADVANCES FOR PEOPLE WITH DISABILITIES

Address: 1909 16TH STREET City, State Zip: BAKERSFIELD, CA 93301

Phone: (661) 325-3003 Fax: (661) 325-2344

Record ID: 150025AN Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

WESTCARE CALIFORNIA Program Name:

Legal Name: WESTCARE CALIFORNIA, INC. Address: 2901 & 2909 SOUTH H STREET City, State Zip: BAKERSFIELD, CA 93304

(661) 398-4303 Phone: Fax: (661) 398-4306

Record ID: 150029AN

Service Type: RES Resident Capacity: 35 Total Occupancy: 35 Target Population: 1.2

Expiration Date: 1/31/2018 IMS: No

Program Name: WESTCARE BAKERSFIELD OUTPATIENT

Legal Name: WESTCARE CALIFORNIA, INC. Address: 2901 SOUTH H STREET BAKERSFIELD, CA 93304 City, State Zip:

Phone: (661) 398-4303 (559) 453-7827 Fax:

150029DN Record ID:

Service Type: NON

Target Population: 1.1

12/31/2018 Expiration Date: IMS: No

Program Name: ASPIRE COUNSELING SERVICES

Legal Name: ASPIRE COUNSELING SERVICES, INC.

Address: 9830 BRIMHALL ROAD City, State Zip: BAKERSFIELD, CA 93312

Phone: (661) 829-7300 (661) 829-7302 Fax:

Record ID: 150059AP

Service Type: NON Target Population: 1.1

10/31/2019 Expiration Date: IMS: Nο

Program Name: CASA AURORA

Legal Name: MENTAL HEALTH SYSTEMS, INC.

1932 JESSIE STREET Address:

BAKERSFIELD, CA 93305-4114 City, State Zip:

Phone: (661) 447-4666

Record ID: 150060CN Service Type: NON Target Population: 1.3

11/30/2017 Expiration Date: IMS: No Program Name: ACTION FAMILY COUNSELING, INC.
Legal Name: ACTION FAMILY COUNSELING, INC.
Address: 3801 BUCK OWENS BOULEVARD,

SUITES 105 - 107

City, State Zip: BAKERSFIELD, CA 93308

Phone: (661) 325-4357 Fax: (661) 325-4345

Record ID: 150062AP
Service Type: NON
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: ACTION FAMILY COUNSELING, INC.
Legal Name: ACTION FAMILY COUNSELING, INC.
Address: 407 HELEN WAY, 9301 OPAL STREET AND

512 STABLE AVENUE

City, State Zip: BAKERSFIELD, CA 93307

Phone: (800) 367-8336 Fax: (661) 297-9701

Record ID: 150062BP
Service Type: RES
Resident Capacity: 30
Total Occupancy: 30
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: SYNERGY RECOVERY SERVICES
Legal Name: SYNERGY RECOVERY SERVICES

Address: 4100 EMPIRE DRIVE,

#120

City, State Zip: BAKERSFIELD, CA 93309

Phone: (661) 878-9100 Fax: (661) 878-9101

Record ID: 150069AP
Service Type: NON

Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: BAKERSFIELD AMERICAN INDIAN HEALTH PROJECT
Legal Name: BAKERSFIELD AMERICAN INDIAN HEALTH PROJECT

Address: 1617 30TH STREET
City, State Zip: BAKERSFIELD, CA 93301

Phone: (661) 327-4030 Fax: (661) 327-0145

Record ID: 150070AN
Service Type: NON

Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: OREGON STREET RECOVERY CENTER

Legal Name: LEGACY VILLAGE, LLC
Address: 1620 OREGON STREET
City, State Zip: BAKERSFIELD, CA 93305

Phone: (661) 843-7360 Fax: (661) 374-4897

Record ID: 150071AP

Service Type: RES Resident Capacity: 20 Total Occupancy: 20 Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

As of 11/1/2017

Kings County

Program Name: ALCOHOL AND DRUG EDUCATION AND COUNSELING CENTER

Legal Name: KINGS VIEW

Address: 1393 BAILEY DRIVE, ROOMS 106, 149, 198 AND 207

City, State Zip: HANFORD, CA 93230

Phone: (559) 582-4481 Fax: (559) 582-6547

Record ID: 160004AN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: CHAMPIONS RECOVERY ALTERNATIVE PROGRAMS, INC.
Legal Name: CHAMPIONS RECOVERY ALTERNATIVE PROGRAMS, INC.

Address: 623, 629 AND 700 NORTH IRWIN STREET

City, State Zip: HANFORD, CA 93230

Phone: (559) 583-9300 Fax: (559) 583-9307

Record ID: 160005AN

Service Type: NON Target Population: 1.5

Expiration Date: 8/31/2019 IMS: No

Program Name: HANNAH'S HOUSE

Legal Name: CHAMPIONS RECOVERY ALTERNATIVE PROGRAMS, INC.

Address: 222 WEST KEITH STREET City, State Zip: HANFORD, CA 93230

Phone: (559) 583-7800 Fax: (559) 583-7890

Record ID: 160005BN

Service Type: RES
Resident Capacity: 15
Total Occupancy: 20
Target Population: 1.14

Expiration Date: 7/31/2018 IMS: No

Program Name: SAMUEL'S HOUSE

Legal Name: CHAMPIONS RECOVERY ALTERNATIVE PROGRAMS, INC.

Address: 11517 15TH AVENUE City, State Zip: LEMOORE, CA 93245

Phone: (559) 583-7800 Fax: (559) 583-9307

Record ID: 160005CN
Service Type: RES
Resident Capacity: 49
Total Occupancy: 49
Target Population: 1.2

Expiration Date: 2/28/2019 IMS: No

Program Name: WESTCARE

Legal Name: WESTCARE CALIFORNIA, INC.

Address: 410 EAST 7TH STREET SUITES 5, 7 AND 9

City, State Zip: HANFORD, CA 93230 Phone: (559) 251-4800

Record ID: 160006CN
Service Type: NON

Target Population: 1.5

Expiration Date: 5/31/2018 IMS: No

As of 11/1/2017

Lake County

Program Name: CLEARLAKE CLINIC

Legal Name: LAKE COUNTY ALCOHOL AND OTHER DRUG SERVICES

Address: 7000-B SOUTH CENTER DRIVE

City, State Zip: CLEARLAKE, CA 95422

Phone: (707) 994-7090 Fax: (707) 994-7164

Record ID: 170002BN

Service Type: NON Target Population: 1.1

11/30/2018 Expiration Date: IMS: No

LAKE COUNTY DIVISION OF ALCOHOL AND OTHER DRUG SERVICES

Program Name: Legal Name: Address: LAKE COUNTY ALCOHOL AND OTHER DRUG SERVICES

6302 13TH AVENUE City, State Zip: LUCERNE, CA 95458

Phone: (707) 274-9101 Fax: (707) 274-9132

Record ID: 170002CN

Service Type: NON Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: Legal Name: Address: HILLTOP RECOVERY SERVICES HILLTOP RECOVERY SERVICES 14720 OLD CATHOLIC CHURCH ROAD

City, State Zip: CLEARLAKE OAKS, CA 95423

Phone: (707) 998-1800 Fax: (707) 987-2591

Record ID: 170011AN

Service Type: RES Resident Capacity: 28 Total Occupancy: 32 Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: HILLTOP RECOVERY INTENSIVE OUTPATIENT PROGRAM

Legal Name: Address: HILLTOP RECOVERY SERVICES 6300 EAST HIGHWAY 20

City, State Zip: LUCERNE, CA 95458

(707) 274-5610 Fax: (707) 274-8327 Phone:

Record ID: 170011DN Service Type: NON Target Population: 1.1

5/31/2018 IMS: Expiration Date: No

As of 11/1/2017 Lassen County

No licensed or certified facilities at this time.

Please check with a neighboring county for services.

As of 11/1/2017

Los Angeles County

Program Name: ANTELOPE VALLEY REHABILITATION CENTER - ACTON
Legal Name: LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH

Address: 30500 ARRASTRE CANYON ROAD

City, State Zip: ACTON, CA 93510

Phone: (661) 269-0062 Fax: (661) 269-4507

Record ID: 190001AN

Service Type: RES
Resident Capacity: 166
Total Occupancy: 166
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: ANTELOPE VALLEY REHABILITATION CENTERS - HIGH DESERT RECOVERY SERVICES

Legal Name: LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH

Address: 44900 NORTH 60TH STREET WEST

City, State Zip: LANCASTER, CA 93536

Phone: (661) 940-3549 Fax: (661) 266-1772

Record ID: 190001CN

Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name:ALCOHOLISM CENTER FOR WOMENLegal Name:ALCOHOLISM CENTER FOR WOMENAddress:1147 SOUTH ALVARADO STREET

City, State Zip: LOS ANGELES, CA 90006

Phone: (213) 381-8500 Fax: (213) 381-9410

Record ID: 190002AN

Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name:ALCOHOLISM CENTER FOR WOMENLegal Name:ALCOHOLISM CENTER FOR WOMENAddress:1135 SOUTH ALVARADO STREET

City, State Zip: LOS ANGELES, CA 90006

Phone: (213) 381-8500 Fax: (213) 381-9410

Record ID: 190002BN
Service Type: RES
Resident Capacity: 32
Total Occupancy: 32

Total Occupancy: 32
Target Population: 1.3

Expiration Date: 2/28/2019 IMS: No

Program Name: COMFORT RECOVERY IOP LLC
Legal Name: COMFORT RECOVERY IOP LLC
Address: 20011 VENTURA BOULEVARD

SUITE 105

City, State Zip: WOODLAND HILLS, CA 91364

Phone: (818) 821-7878

Record ID: 190005AP
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: BEACON HOUSE

Legal Name: THE BEACON HOUSE ASSOCIATION OF SAN PEDRO

Address: 1003 SOUTH BEACON STREET City, State Zip: SAN PEDRO, CA 90731

Phone: (310) 514-4940

Record ID: 190006AN Service Type: RES

Resident Capacity: 18
Total Occupancy: 18
Target Population: 1.2

Expiration Date: 3/31/2018 IMS: No

Program Name: LIGHTHOUSE

Legal Name: THE BEACON HOUSE ASSOCIATION OF SAN PEDRO

Address: 132 WEST 10TH STREET City, State Zip: SAN PEDRO, CA 90731

Phone: (310) 514-4940

Record ID: 190006BN
Service Type: RES
Resident Capacity: 25
Total Occupancy: 25

Target Population: 1.2

Expiration Date: 3/31/2018 IMS: No

Program Name: MCMILLEN HOUSE

Legal Name: THE BEACON HOUSE ASSOCIATION OF SAN PEDRO

Address: 1012 SOUTH PALOS VERDES STREET

City, State Zip: SAN PEDRO, CA 90731

Phone: (310) 514-4940 Fax: (310) 331-0070

Record ID: 190006DN
Service Type: RES
Resident Capacity: 25
Total Occupancy: 25

Total Occupancy: 25 Target Population: 1.2

Expiration Date: 3/31/2018 IMS: No

Program Name: CHANNEL VIEW HOUSE

Legal Name: THE BEACON HOUSE ASSOCIATION OF SAN PEDRO

Address: 124 WEST 11TH STREET
City, State Zip: SAN PEDRO, CA 90731
Phone: (310) 514-4940

Record ID: 190006EN
Service Type: RES
Resident Capacity: 27
Total Occupancy: 27
Target Population: 1.2

Expiration Date: 3/31/2018 IMS: No

Program Name: PROPER HOUSE

Legal Name: THE BEACON HOUSE ASSOCIATION OF SAN PEDRO

Address: 1021 S. BEACON STREET City, State Zip: SAN PEDRO, CA 90731

Phone: (310) 514-4940 Fax: (310) 831-0070

Record ID: 190006GN

Service Type: RES
Resident Capacity: 15
Total Occupancy: 15
Target Population: 1.2

Expiration Date: 7/31/2019 IMS: No

Program Name: HOLLYWOOD FAMILY RECOVERY CENTER

Legal Name: BEHAVIORAL HEALTH SERVICES, INC.

Address: 6838 SUNSET BOULEVARD City, State Zip: HOLLYWOOD, CA 90028

Phone: (323) 461-3161 Fax: (310) 679-2920

Record ID: 190007AN

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

WILMINGTON COMMUNITY RECOVERY CENTER Program Name:

Legal Name: BEHAVIORAL HEALTH SERVICES, INC.

Address: 1318A AND 1314B NORTH AVALON BOULEVARD

City, State Zip: WILMINGTON, CA 90744

(310) 549-2715 Phone: (310) 549-2710 Fax:

Record ID: 190007CN

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: PATTERNS

Legal Name: BEHAVIORAL HEALTH SERVICES, INC.

Address: 12917 CERISE AVENUE City, State Zip: HAWTHORNE, CA 90250

Phone: (310) 675-4431 Fax: (310) 675-4434

Record ID: 190007FN

Service Type: RES Resident Capacity: 23 Total Occupancy: 35 Target Population: 1.4

Expiration Date: 9/30/2019 IMS: No

PACIFICA HOUSE Program Name:

Legal Name: BEHAVIORAL HEALTH SERVICES, INC. Address: 2501 WEST EL SEGUNDO BOULEVARD

City, State Zip: HAWTHORNE, CA 90250

Fax: Phone: (323) 754-2816 (323) 754-2828

Record ID: 190007GN

Service Type: RES Resident Capacity: 58 Total Occupancy: 68 Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: SOUTH BAY RECOVERY CENTER

Legal Name: BEHAVIORAL HEALTH SERVICES, INC.

Address: 15519 CRENSHAW BOULEVARD

GARDENA, CA 90249 City, State Zip:

Phone: (310) 679-9031 (310) 679-2920 Fax:

190007HN Record ID:

Service Type: NON Target Population: 1.1

9/30/2019 IMS: Expiration Date: No

Program Name: AMERICAN RECOVERY CENTER

Legal Name: BEHAVIORAL HEALTH SERVICES, INC. 2180 WEST VALLEY BOULEVARD, Address:

FLOOR 200

POMONA, CA 91768 City, State Zip:

Phone: (909) 865-2336 Fax: (909) 865-1831

Record ID: 190007IN

Service Type: DPH Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

BOYLE HEIGHTS FAMILY RECOVERY CENTER Program Name:

Legal Name: BEHAVIORAL HEALTH SERVICES, INC.

Address: 3421 E. OLYMPIC BOULEVARD

City, State Zip: LOS ANGELES, CA 90023

Phone: (323) 262-1786 Fax: (323) 262-2659

Record ID: 190007JN

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No Program Name: LINCOLN HEIGHTS FAMILY RECOVERY CENTER

Legal Name: BEHAVIORAL HEALTH SERVICES, INC. Address: 4099 NORTH MISSION ROAD, UNIT A

City, State Zip: LOS ANGELES, CA 90032

Phone: (323) 221-1746 Fax: (323) 221-5176

Record ID: 190007KN
Service Type: NON

Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: REDGATE MEMORIAL RECOVERY CENTER
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.

Address: 1775 CHESTNUT AVENUE City, State Zip: LONG BEACH, CA 90813

Phone: (562) 599-8444 Fax: (562) 591-6034

Record ID: 190007LN
Service Type: DPH
Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: AMERICAN RECOVERY CENTER

Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 2180 WEST VALLEY BOULEVARD,
FLOORS 100, 300 AND 400

City, State Zip: POMONA, CA 91768 Phone: (909) 865-2336

Phone: (909) 865

Record ID: 190007MN

Service Type: RES
Resident Capacity: 123
Total Occupancy: 123
Target Population: 1.1

Expiration Date: 2/28/2019 IMS:

Program Name: AMERICAN RECOVERY CENTER OUTPATIENT PROGRAM

Legal Name: BEHAVIORAL HEALTH SERVICES, INC.

Address: 2180 WEST VALLEY BOULEVARD

City, State Zip: POMONA, CA 91766

Phone: (909) 865-2336 Fax: (310) 679-2920

Record ID: 1900070N Service Type: NON

Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: JOINT EFFORTS

Legal Name: BEHAVIORAL HEALTH SERVICES, INC.

Address: 590 WEST 8TH STREET City, State Zip: SAN PEDRO, CA 90731

Phone: (310) 831-2358 Fax: (310) 831-2356

Record ID: 190007QN

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: NATIONAL COUNCIL ON ALCOHOLISM & DRUG DEPENDENCE OF THE SOUTH BAY

No

Legal Name: BEHAVIORAL HEALTH SERVICES, INC.

Address: 1334 POST AVENUE City, State Zip: TORRANCE, CA 90501

Phone: (310) 328-1460 Fax: (310) 328-1964

Record ID: 190007RN Service Type: NON

Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: FLOSSIE LEWIS CENTER

Legal Name: BEHAVIORIAL HEALTH SERVICES, INC. Address: 341 & 351 EAST 6TH STREET AND

615 ELM AVENUE

City, State Zip: LONG BEACH, CA 90802

Phone: (562) 435-7350 Fax: (562) 432-4532

Record ID: 190007SN
Service Type: RES
Resident Capacity: 27
Total Occupancy: 27
Target Population: 1.3

Expiration Date: 7/31/2018 IMS: No

Program Name: LONG BEACH FAMILY RECOVERY CENTER
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.
Address: 514 W. PACIFIC COAST HIGHWAY
City, State Zip: LONG BEACH, CA 90806-5237

Phone: (562) 432-0713 Fax: (844) 676-6538

Record ID: 190007VN
Service Type: NON
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: HIGH GAIN PROGRAM

Legal Name: BEHAVIORAL HEALTH SERVICES, INC. Address: 9100 SOUTH SEPULVEDA BLVD. #105

City, State Zip: LOS ANGELES, CA 90045

Phone: (310) 644-3659 Fax: (310) 216-6747

Record ID: 190007WN
Service Type: NON

Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: THE BISHOP GOODEN HOME

Legal Name: THE GOODEN CENTER

Address: 191 NORTH EL MOLINO AVENUE

City, State Zip: PASADENA, CA 91101

Phone: (626) 356-0078 Fax: (626) 795-2844

Record ID: 190009AN Service Type: RES

Resident Capacity: 19
Total Occupancy: 19
Target Population: 1.8

Expiration Date: 3/31/2018 IMS: No

Program Name: DRUG AND ALCOHOL COUNSELING SERVICES

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.

Address: 11500 PARAMOUNT BOULEVARD

City, State Zip: DOWNEY, CA 90241

Phone: (562) 923-4545 Fax: (562) 862-5906

Record ID: 190011AAN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: POSITIVE STEPS

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.

Address: 8332 IOWA STREET AND 11501 DOLAN AVENUE

City, State Zip: DOWNEY, CA 90241
Phone: (562) 923-7894 Fax: (562) 869-3400

Record ID: 190011AFN
Service Type: RES-DETOX

Resident Capacity: 47
Total Occupancy: 57
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: FOLEY HOUSE

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Address: 10501, 10505, 10511, 10517, AND 10519 MILLS AVENUE

City, State Zip: WHITTIER, CA 90604

Phone: (562) 944-7953 Fax: (562) 946-7494

Record ID: 190011AN
Service Type: RES-DETOX

Resident Capacity: 20 Total Occupancy: 30 Target Population: 1.4

Expiration Date: 3/31/2018 IMS: No

Program Name: AWAKENINGS

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.

Address: 12322 CLEARGLEN,

APARTMENTS 1, 2, 3 AND 4

City, State Zip: WHITTIER, CA 90604

Phone: (562) 947-3835 Fax: (562) 943-1235

Record ID: 190011KN
Service Type: RES-DETOX

Resident Capacity: 14
Total Occupancy: 20
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: LA CASITA DE LAS MAMAS OF DOWNEY

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.

Address: 10603, 10615 AND 10621 DOWNEY AVENUE

City, State Zip: DOWNEY, CA 90241

Phone: (562) 622-2268 Fax: (562) 923-5164

Record ID: 1900110N
Service Type: RES-DETOX

Resident Capacity: 18 Total Occupancy: 26 Target Population: 1.4

Expiration Date: 3/31/2018 IMS: No

Program Name: ANGEL STEP TOO

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.

Address: 16314, 16316, 16316-1/2, 16318, 16318-1/2, 16322, 16322-1/2,

AND 16322-7/8 CORNUTA AVENUE

City, State Zip: BELLFLOWER, CA 90706

Phone: (562) 461-9272

Record ID: 190011VN
Service Type: RES
Resident Capacity: 30
Total Occupancy: 54
Target Population: 1.4

Expiration Date: 11/30/2017 IMS: No

Program Name: CASA DE LAS AMIGAS-THE JON DUDLEY OUTPATIENT CENTER

Legal Name: CASA DE LAS AMIGAS
Address: 744 EAST WALNUT AVENUE
City, State Zip: PASADENA, CA 91101

Phone: (626) 792-2770 Fax: (626) 792-5826

Record ID: 190012BN Service Type: NON

Target Population: 1.8

Expiration Date: 6/30/2018 IMS: No

Program Name: CASA DE LAS AMIGAS Legal Name: CASA DE LAS AMIGAS

160 NORTH EL MOLINO AVENUE AND Address:

173 NORTH OAK KNOLL AVENUE

City, State Zip: PASADENA, CA 91101

Phone: (626) 792-2770 Fax: (626) 792-5826

Record ID: 190012CN RES-DETOX Service Type:

Resident Capacity: 34 Total Occupancy: 34 Target Population: 1.8

Expiration Date: 3/31/2018 IMS: No

Program Name: CASTLE SUBSTANCE ABUSE PROGRAM - WEST

PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA Legal Name:

Address: 1319 SOUTH MANHATTAN PLACE

City, State Zip: LOS ANGELES, CA 90019

Phone: (323) 735-7059

Record ID: 190013AN Service Type: RES

Resident Capacity: 40 Total Occupancy: 40 Target Population: 1.1

Expiration Date: 10/31/2017 TMS: Nο

CASTLE SUBSTANCE ABUSE PROGRAM-OUTPATIENT Program Name:

Legal Name: PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA

Address: 3021 SOUTH VERMONT AVENUE

City, State Zip: LOS ANGELES, CA 90007

Phone: (323) 732-9124

Record ID: 190013BN Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

CASTLE SUBSTANCE ABUSE PROGRAM - EAST Program Name:

PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA Legal Name:

Address: 4771 SOUTH MAIN STREET City, State Zip: LOS ANGELES, CA 90037

(323) 233-3342 Phone:

Record ID: 190013CN

Service Type: RES Resident Capacity: 40 Total Occupancy: 40 Target Population: 1.1

10/31/2017 IMS: Expiration Date: Nο

Program Name: SANTA MONICA RECOVERY CENTER

Legal Name: CLARE FOUNDATION, INC. Address: 905 AND 907 PICO BOULEVARD City, State Zip: SANTA MONICA, CA 90405

Phone: (310) 314-6200

190016BN Record ID: RES-DETOX Service Type:

Resident Capacity: 49 Total Occupancy: 49 Target Population: 1.1

Expiration Date: 7/31/2018 IMS: Nο

Program Name: WOMEN'S RECOVERY HOME Legal Name: CLARE FOUNDATION, INC. Address: 844 PICO BOULEVARD

City, State Zip: SANTA MONICA, CA 90405

Phone: (310) 314-6200

Record ID: 190016FN RES-DETOX Service Type:

Resident Capacity: 40 Total Occupancy: 40 Target Population: 1.3

Expiration Date: 7/31/2018 IMS: Nο Program Name: CLARE FOUNDATION INTENSIVE OUTPATIENT PROGRAM

Legal Name: CLARE FOUNDATION, INC. Address: 1020 PICO BOULEVARD City, State Zip: SANTA MONICA, CA 90405

Phone: (310) 314-6200 Ext:3424 Fax: (310) 399-2850

Record ID: 190016HN
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: CONSCIOUS RECOVERY BY CLARE

Legal Name: CLARE FOUNDATION, INC. Address: 1334 LINCOLN BOULEVARD City, State Zip: SANTA MONICA, CA 90401

Phone: (310) 576-2063 Fax: (310) 396-6974

Record ID: 190016KN
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: PICO OUTPATIENT

Legal Name: CLARE FOUNDATION, INC. Address: 1002 PICO BOULEVARD City, State Zip: SANTA MONICA, CA 90405

Phone: (310) 314-6200 Fax: (310) 314-6221

Record ID: 190016LN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019

Program Name: GRANDVIEW FOUNDATION, INC. - RESIDENTIAL

IMS:

No

No

Legal Name: GRANDVIEW FOUNDATION, INC.
Address: 1230 NORTH MARENGO AVENUE AND

225 GRANDVIEW STREET PASADENA, CA 91103

City, State Zip: PASADENA, CA 91103 Phone: (626) 797-1124 Fax: (626) 398-9674

Record ID: 190022AN

Service Type: RES Resident Capacity: 41 Total Occupancy: 43 Target Population: 1.2

Expiration Date: 3/31/2019 IMS: No

Program Name: GRANDVIEW FOUNDATION, INC.
Legal Name: GRANDVIEW FOUNDATION, INC.
Address: 1230 NORTH MARENGO AVENUE

City, State Zip: PASADENA, CA 91103

Phone: (626) 797-1124 Ext:116 Fax: (626) 398-9674

Record ID: 190022EN
Service Type: NON

Target Population: 1.1

Expiration Date: 12/31/2017 IMS:

Program Name: HOPE HARBOR CENTER
Legal Name: THE SALVATION ARMY
Address: 3107 SOUTH GRAND AVENUE
City, State Zip: LOS ANGELES, CA 90007

Phone: (213) 744-8186 Fax: (213) 626-0717

Record ID: 190023AN

Service Type: RES Resident Capacity: 56 Total Occupancy: 56 Target Population: 1.2

Expiration Date: 4/30/2018 IMS: No

THE SALVATION ARMY BELL SHELTER--WELLNESS CENTER Program Name:

Legal Name: THE SALVATION ARMY 5600 RICKENBACKER ROAD, Address:

BUILDING 2A-B

City, State Zip: BELL, CA 90201

Phone: (323) 263-1206 Fax: (323) 263-8543

Record ID: 190023CN Service Type: RES Resident Capacity: 75 75 Total Occupancy:

Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: THE SALVATION ARMY HOPE HARBOR CENTER

Legal Name: THE SALVATION ARMY Address: 3107 SOUTH GRAND AVENUE City, State Zip: LOS ANGELES, CA 90007

Phone: (213) 744-1688 Fax: (213) 744-8186

Record ID: 190023HN Service Type: NON Target Population: 1.2

Expiration Date: 4/30/2019 IMS: No

Program Name: HOUSE OF HOPE

Legal Name: HOUSE OF HOPE FOUNDATION, INC.

221, 223, 225, 227, 229, 235 WEST 9TH STREET Address:

City, State Zip: SAN PEDRO, CA 90731

Phone: (310) 831-9411 (310) 831-5796 Fax:

Record ID: 190025AN

Service Type: RES Resident Capacity: 18 Total Occupancy: 18 Target Population: 1.3

Expiration Date: 3/31/2018 IMS: No

Program Name: HOUSE OF HOPE FOUNDATION, INC. HOUSE OF HOPE FOUNDATION, INC. Legal Name:

205 WEST 9TH STREET Address: City, State Zip: SAN PEDRO, CA 90731

Phone: (310) 521-9209 Fax: (310) 521-9241

Record ID: 190025GN Service Type: NON

Target Population: 1.3

7/31/2019 Expiration Date: IMS: No

Program Name: JAN CLAYTON CENTER

Legal Name: VOLUNTEERS OF AMERICA OF LOS ANGELES

Address: 4969 SUNSET BOULEVARD City, State Zip: LOS ANGELES, CA 90027

Phone: (323) 660-8042 (323) 660-9265 Fax:

Record ID: 190027AN Service Type: RES-DETOX

Resident Capacity: 48 Total Occupancy: 48 Target Population: 1.1

Expiration Date: 2/28/2018 TMS: No

VOA OF CENTRAL CITY RECOVERY SERVICES Program Name: Legal Name: VOLUNTEERS OF AMERICA OF LOS ANGELES

Address: 515 EAST 6TH STREET,

9TH FLOOR

City, State Zip: LOS ANGELES, CA 90021

Phone: (323) 660-8042 Fax: (213) 622-6831

Record ID: 190027BN

Service Type: RES Resident Capacity: 48 Total Occupancy: 48 Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No Program Name: HOMELESS VETERANS CORRECTIONAL REHABILITATION / VS90

Legal Name: VOLUNTEERS OF AMERICA OF LOS ANGELES Address: 1765 SOUTH LA CIENEGA BOULEVARD

City, State Zip: LOS ANGELES, CA 90035

Phone: (310) 204-0690 Record ID: 190027HN

Record ID: 190
Service Type: RES
Resident Capacity: 50
Total Occupancy: 50
Target Population: 1.2

Expiration Date: 12/31/2018 IMS: No

Program Name: PASADENA OUTPATIENT
Legal Name: PASADENA OUTPATIENT LLC
Address: 1 WEST MOUNTAIN STREET,

SUITE 10

City, State Zip: PASADENA, CA 91103 Phone: (800) 521-1766

Record ID: 190028AP
Service Type: NON
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: LITTLE HOUSE
Legal Name: LITTLE HOUSE

Address: 9718 HARVARD STREET

City, State Zip: BELLFLOWER, CA 90706-3699

Phone: (562) 925-2777 Fax: (562) 925-7572

Record ID: 190029AN

Service Type: RES Resident Capacity: 28 Total Occupancy: 34 Target Population: 1.3

Expiration Date: 9/30/2019 IMS: No

Program Name:PALM HOUSE RECOVERY HOMELegal Name:PALM HOUSE, INCORPORATEDAddress:2515 EAST JEFFERSON STREET

City, State Zip: CARSON, CA 90810

Phone: (310) 830-7803 Fax: (310) 830-6606

Record ID: 190040AN

Service Type: RES Resident Capacity: 16 Total Occupancy: 16 Target Population: 1.2

Expiration Date: 7/31/2018 IMS: No

Program Name: PASADENA SUBSTANCE USE PREVENTION & TREATMENT SERVICES

Legal Name: PASADENA PUBLIC HEALTH DEPARTMENT

Address: 1845 NORTH FAIR OAKS AVENUE

City, State Zip: PASADENA, CA 91103

Phone: (626) 744-6001 Fax: (626) 744-6096

Record ID: 190041AN
Service Type: NON

Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: NATIONAL COUNCIL ON ALCOHOLISM AND

DRUG DEPENDENCE OF THE SAN FERNANDO VALLEY

Legal Name: NATIONAL COUNCIL ON ALCOHOLISM AND

DRUG DEPENDENCE OF THE SAN FERNANDO VALLEY

Address: 6166 VESPER AVENUE City, State Zip: VAN NUYS, CA 91411

Phone: (818) 997-0414 Fax: (818) 997-0851

Record ID: 190049AN

Service Type: NON Target Population: 1.5

Expiration Date: 4/30/2018 IMS: No

NATIONAL COUNCIL ON ALCOHOLISM AND Program Name:

DRUG DEPENDENCE OF THE SAN FERNANDO VALLEY

NATIONAL COUNCIL ON ALCOHOLISM AND Legal Name:

DRUG DEPENDENCE OF THE SAN FERNANDO VALLEY

Address: 24460 LYONS AVENUE City, State Zip: SANTA CLARITA, CA 91321

1.1

(616) 253-9400 Phone: Fax: (818) 997-0851

Record ID: 190049BN Service Type: NON

Target Population:

Expiration Date: 2/28/2019 IMS: No

Program Name: SAFE HAVEN RECOVERY

Legal Name: SAFE HAVEN RECOVERY, INC. Address: 1690 COLDWATER CANYON DRIVE City, State Zip: BEVERLY HILLS, CA 90210

Phone: (818) 288-5152

Record ID: 190051AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: RICKMAN RECOVERY CENTERS

Legal Name: NORMAN L. RICKMAN Address: 1433 E. ROUTE 66,

SUITE F

City, State Zip: GLENDORA, CA 91740

(626) 962-3203 Phone: Fax: (626) 962-0036

Record ID: 190062BP

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

HIS SHELTERING ARMS, INC. INTEGRATED BEHAVIORAL HEALTHCARE SYSTEMS Program Name:

HIS SHELTERING ARMS INC. Legal Name: Address: 112 WEST 111TH STREET AND 11101 SOUTH MAIN STREET

City, State Zip: LOS ANGELES, CA 90061

Phone: (323) 755-6646 Fax: (323) 777-2209

Record ID: 190064BN

Service Type: RES Resident Capacity: 49 Total Occupancy: 69 Target Population: 1.4

Expiration Date: 5/31/2019 IMS: No

HIS SHELTERING ARMS INC.-INTEGRATED BEHAVIORAL HEALTHCARE SYSTEMS Program Name:

Legal Name: HIS SHELTERING ARMS INC. Address: 11101 SOUTH MAIN STREET,

SUITE 115

LOS ANGELES, CA 90061-1925 City, State Zip:

(323) 755-6646 Phone: (323) 777-2209 Fax:

Record ID: 190064CN Service Type: NON

Target Population: 1.4

Expiration Date: 8/31/2019 IMS: No

Program Name: MUJERES RECOVERY HOME

Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.

Address: 530 NORTH AVENUE 54 City, State Zip: LOS ANGELES, CA 90042

Phone: (323) 254-2423

Record ID: 190065AN RES Service Type:

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.3

Expiration Date: 6/30/2018 IMS: Nο Program Name: LATINOS RECOVERY HOME

Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.

Address: 2436 WABASH AVENUE City, State Zip: LOS ANGELES, CA 90033

Phone: (323) 780-8756 Fax: (323) 780-8333

Record ID: 190065CN
Service Type: RES
Resident Capacity: 6

Total Occupancy: 6
Target Population: 1.2

Expiration Date: 6/30/2018 IMS: No

Program Name: LATINAS RECOVERY HOME

Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.

Address: 327 NORTH SAINT LOUIS STREET

City, State Zip: LOS ANGELES, CA 90063

Phone: (323) 261-7810 Fax: (323) 261-1375

Record ID: 190065EN
Service Type: RES

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 6/30/2018 IMS: No

Program Name: SAN GABRIEL VALLEY CENTER

Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.

Address: 11046 VALLEY MALL City, State Zip: EL MONTE, CA 91731

Phone: (626) 444-6000 Fax: (626) 444-9044

Record ID: 190065HN Service Type: NON

Target Population: 1.7

Expiration Date: 1/31/2018 IMS: No

Program Name: LATINO FAMILY ALCOHOL AND DRUG SERVICES

Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.

Address: 3316-3320 WEST BEVERLY BOULEVARD

City, State Zip: MONTEBELLO, CA 90640

Phone: (323) 722-4529 Fax: (323) 722-4450

Record ID: 190065IN

Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: MENTAL HEALTH AND ADDICTION SERVICES FOR ADOLESCENTS

Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.

Address: 2309 DALY STREET
City, State Zip: LOS ANGELES, CA 90031

Phone: (323) 222-4591 Fax: (323) 222-4614

Record ID: 190065JN

Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: SAFE REFUGE Legal Name: SAFE REFUGE

Address: 3111, 3113, 3115, 3119, 3125, AND 3131 EAST SEVENTH ST. APTS 1, 3, 4, 5, 6;

719 APTS 1-10, 727 & 729 OBISPO AVE; AND 718, 728, 728A, 728 1/2 FREEMAN AV

City, State Zip: LONG BEACH, CA 90804

Phone: (562) 987-5722 Fax: (562) 987-4586

Record ID: 190077AHN
Service Type: RES-DETOX

Resident Capacity: 89
Total Occupancy: 89
Target Population: 1.9

Expiration Date: 10/31/2018 IMS: No

Program Name: SAFE REFUGE Legal Name: SAFE REFUGE

Address: 3125, 3137 AND 3139 EAST SEVENTH STREET

City, State Zip: LONG BEACH, CA 90804

1.1

Phone: (562) 987-5722 Fax: (562) 987-4586

Record ID: 190077CN
Service Type: NON

Target Population:

Expiration Date: 5/31/2019 IMS: No

Program Name: SAFE REFUGE Legal Name: SAFE REFUGE

Address: 1046 REDONDO AVENUE City, State Zip: LONG BEACH, CA 90804

Phone: (562) 987-5722 Fax: (562) 987-4586

Record ID: 190077RN
Service Type: NON
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: LIVE AGAIN RECOVERY HOME - CAMP CISQUITO

Legal Name: LIVE AGAIN MINISTRIES

Address: 38215 NORTH SAN FRANCISQUITO CANYON ROAD

City, State Zip: SAUGUS, CA 91350 Phone: (661) 270-0025

Record ID: 190079BN
Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.2

Expiration Date: 9/30/2017 IMS: No

Program Name: THE RIVER COMMUNITY

Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.

Address: 23701 EAST FORK STREET

City, State Zip: AZUSA, CA 91702

Phone: (626) 250-3290 Fax: (626) 910-1380

Record ID: 190081AN

Service Type: RES Resident Capacity: 38 Total Occupancy: 38 Target Population: 1.8

Expiration Date: 3/31/2018 IMS: No

Program Name: RIVER COMMUNITY DAY TREATMENT

Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.

Address: 510 SOUTH SECOND AVENUE,

SUITE 6 AND 7

City, State Zip: COVINA, CA 91723-3017

Phone: (626) 974-8198

Record ID: 190081BN Service Type: NON

Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: SOCIAL MODEL RECOVERY SYSTEMS (PCADD)
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.

Address: 1245 EAST WALNUT STREET,

SUITE 101, 103, 107, 109, 115, 117 AND 118

City, State Zip: PASADENA, CA 91106

Phone: (626) 795-9127 Fax: (626) 795-0979

Record ID: 190081EN

Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: OMNI CENTER

Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.

Address: 3426 AND 3430 COGSWELL ROAD

City, State Zip: EL MONTE, CA 91732 Phone: (626) 453-3400

Record ID: 190081FN Service Type: RES Resident Capacity: 38 Total Occupancy: 38 Target Population: 1.2

Expiration Date: 2/28/2018 IMS: No

Program Name: MARIPOSA RECOVERY HOME

Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.

Address: 453 SOUTH INDIANA STREET City, State Zip: LOS ANGELES, CA 90063

Phone: (323) 266-7726 (323) 266-7742 Fax:

Record ID: 190081GN

Service Type: RES Resident Capacity: 13 Total Occupancy: 15 Target Population: 1.3

Expiration Date: 10/31/2018 TMS: Nο

Program Name: MID VALLEY OUTPATIENT SERVICES

Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.

Address: 3131 SANTA ANITA AVENUE,

SUITE 112B

City, State Zip: EL MONTE, CA 91733

(626) 453-3432 Phone: Fax:

(626) 453-3415

Record ID: 190081HN

Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

STEPPING STONES HOME I & II Program Name:

SOCIAL MODEL RECOVERY SYSTEMS, INC. Legal Name: Address: 17719 AND 17727 EAST CYPRESS STREET

City, State Zip: COVINA, CA 91722

(626) 967-2677 Phone: Fax: (626) 858-4923

Record ID: 190081IN

Service Type: RES Resident Capacity: 18 Total Occupancy: 23

Target Population: 1.4

Expiration Date: 1/31/2018 TMS: Nο

Program Name: ROYAL PALMS RECOVERY HOME

SOCIAL MODEL RECOVERY SYSTEMS, INC. Legal Name:

Address: 360 SOUTH WESTLAKE AVENUE LOS ANGELES, CA 90057 City, State Zip:

Phone: (213) 483-9201 Fax: (626) 332-3145

Record ID: 190081JN

Service Type: RES Resident Capacity: 115 Total Occupancy: 115 Target Population: 1.2

Expiration Date: 12/31/2017 IMS: No

Program Name: RENA B. RECOVERY HOME

Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC. Address: 4439, 4445 AND 4455 BURNS AVENUE

City, State Zip: LOS ANGELES, CA 90029

Phone: (323) 664-8940 Fax: (626) 332-3145

190081KN Record ID:

RES Service Type: Resident Capacity: 76 Total Occupancy: 76 Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No Program Name: BIMINI RECOVERY CENTER

Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.

Address: 155 SOUTH BIMINI PLACE City, State Zip: LOS ANGELES, CA 90004

Phone: (213) 388-5423 Fax: (213) 388-1317

Record ID: 190081LN
Service Type: RES
Resident Capacity: 84

Total Occupancy: 84
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: GLENDALE ADVENTIST ALCOHOL AND DRUG SERVICES

Legal Name: GLENDALE ADVENTIST MEDICAL CENTER

Address: 335 MISSION ROAD City, State Zip: GLENDALE, CA 91205

Phone: (818) 242-3116 Fax: (818) 242-5759

Record ID: 190082BN
Service Type: RES-DETOX

Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: TARZANA TREATMENT CENTERS

Legal Name: TARZANA TREATMENT CENTERS, INC.

Address: 18646 OXNARD STREET, SOUTH AND WEST WINGS

City, State Zip: TARZANA, CA 91356

Phone: (818) 996-1051 Fax: (818) 654-3906

Record ID: 190085AN
Service Type: RES-DETOX
Resident Capacity: 152
Total Occupancy: 165

Total Occupancy: 165
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: TARZANA TREATMENT CENTER - LONG BEACH

Legal Name: TARZANA TREATMENT CENTERS, INC.

Address: 2101 MAGNOLIA AVENUE City, State Zip: LONG BEACH, CA 90806

Phone: (562) 218-1868 Fax: (562) 596-0346

Record ID: 190085BN
Service Type: RES-DETOX

Resident Capacity: 84
Total Occupancy: 109
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: TARZANA TREATMENT CENTER - DETOX
Legal Name: TARZANA TREATMENT CENTERS, INC.

Address: 18646 OXNARD STREET, DETOXIFICATION UNIT

City, State Zip: TARZANA, CA 91356

Phone: (818) 996-1051 Fax: (818) 654-3906

Record ID: 190085DN

Service Type: NON Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: TARZANA TREATMENT CENTER OUTPATIENT SERVICES

Legal Name: TARZANA TREATMENT CENTERS, INC.

Address: 18646 OXNARD STREET City, State Zip: TARZANA, CA 91356

Phone: (818) 996-1051 Fax: (818) 654-3906

Record ID: 190085FN

Service Type: NON Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: Tarzana Treatment Centers, Inc.
Legal Name: TARZANA TREATMENT CENTERS, INC.
Address: 44447 NORTH 10TH STREET WEST

BUILDING A

City, State Zip: LANCASTER, CA 93534

Phone: (661) 726-2630 Fax: (818) 975-5013

Record ID: 190085GN
Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: TARZANA TREATMENT CENTER - NORTHRIDGE

Legal Name: TARZANA TREATMENT CENTERS, INC.

Address: 18700 OXNARD STREET City, State Zip: TARZANA, CA 91356

Phone: (818) 996-1051 Fax: (818) 966-3051

Record ID: 190085HN
Service Type: NON
Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: TARZANA TREATMENT CENTER YOUTH SERVICES - LANCASTER

Legal Name: TARZANA TREATMENT CENTERS, INC. Address: 44443 NORTH 10TH STREET WEST

City, State Zip: LANCASTER, CA 93535

Phone: (818) 996-1051 Fax: (818) 966-3051

Record ID: 190085JN Service Type: NON

Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: TARZANA TREATMENT CENTER

Legal Name: TARZANA TREATMENT CENTERS, INC.

Address: 7101 BAIRD AVENUE City, State Zip: RESEDA, CA 91335

Phone: (818) 996-1051 Fax: (818) 996-3051

Record ID: 190085KN
Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: TARZANA TREATMENT CENTER - LANCASTER

Legal Name: TARZANA TREATMENT CENTERS, INC. Address: 44447 NORTH 10TH STREET WEST

BUILDING B

City, State Zip: LANCASTER, CA 93534

Phone: (661) 726-2630 Fax: (818) 996-3051

Record ID: 190085LN
Service Type: RES-DETOX

Resident Capacity: 40 Total Occupancy: 51 Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: TARZANA TREATMENT CENTERS, INC.
Legal Name: TARZANA TREATMENT CENTERS, INC.

Address: 5190 ATLANTIC AVENUE

City, State Zip: LONG BEACH, CA 90806 Phone: (818) 428-4111

Record ID: 190085NN
Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: TARZANA TREATMENT CENTERS
Legal Name: TARZANA TREATMENT CENTERS, INC.

Address: 44459 10TH STREET WEST City, State Zip: LANCASTER, CA 93534

Phone: (818) 996-1051 Ext:4100 Fax: (818) 996-3051

Record ID: 1900850N
Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: TARZANA TREATMENT CENTERS - LANCASTER

Legal Name: TARZANA TREATMENT CENTERS, INC. Address: 44447 NORTH 10TH STREET WEST,

BUILDING C

City, State Zip: LANCASTER, CA 93534

Phone: (818) 996-1051 Fax: (818) 966-3051

Record ID: 190085PN
Service Type: DSS
Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: CHABAD RESIDENTIAL TREATMENT CENTER

Legal Name: CHABAD OF CALIFORNIA

Address: 5675 WEST OLYMPIC BOULEVARD

City, State Zip: LOS ANGELES, CA 90036

Phone: (323) 965-1365 Fax: (323) 965-1275

Record ID: 190087CN

Service Type: RES Resident Capacity: 44 Total Occupancy: 44 Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: CHABAD RECOVERY OUTPATIENT CENTER

Legal Name: CHABAD OF CALIFORNIA

Address: 1750 SOUTH LA CIENEGA BLVD

City, State Zip: LOS ANGELES, CA 90035

Phone: (323) 965-1365 Fax: (323) 965-0444

Record ID: 190087DN

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2020 IMS: No

Program Name: DIDI HIRSCH MENTAL HEALTH SERVICES
Legal Name: DIDI HIRSCH PSYCHIATRIC SERVICE

Address: 11643 GLENOAKS BOULEVARD City, State Zip: PACOIMA, CA 913311050

Phone: (310) 897-2609 Fax: (818) 890-7159

Record ID: 190092AN

Service Type: RES
Resident Capacity: 40
Total Occupancy: 60
Target Population: 1.4

Expiration Date: 7/31/2018 IMS: No

Program Name: DIDI HIRSCH COMMUNITY MENTAL HEALTH CENTER,

OUTPATIENT SUBSTANCE ABUSE SERVICES

Legal Name: DIDI HIRSCH PSYCHIATRIC SERVICE Address: 11133 WASHINGTON BOULEVARD

City, State Zip: CULVER CITY, CA 90230

Phone: (310) 895-2300 Fax: (310) 398-5690

Record ID: 190092BN

Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: DIDI HIRSCH MENTAL HEALTH SERVICES- YOUTH SUBSTANCE ABUSE SERVICES PROGRAM

(818) 244-5431

Legal Name: DIDI HIRSCH PSYCHIATRIC SERVICE

Address: 12420 VENICE BOULEVARD,

SUITE 200

City, State Zip: LOS ANGELES, CA 90066

Phone: (310) 751-1200 Fax: (310) 398-0312

Record ID: 190092CN
Service Type: NON
Target Population: 1.5

Expiration Date: 12/31/2017 IMS: No

Program Name:DIDI HIRSCH PSYCHIATRIC SERVICELegal Name:DIDI HIRSCH PSYCHIATRIC SERVICE

Address: 1540 COLORADO STREET City, State Zip: GLENDALE, CA 91205-1514

Phone: (818) 244-7257 Fax:

Record ID: 190092DN
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: DIDI HIRSCH MENTAL HEALTH SERVICES
Legal Name: DIDI HIRSCH PSYCHIATRIC SERVICE

Address: 323 NORTH PRAIRIE AVENUE, City, State Zip: INGLEWOOD, CA 90301

Phone: (310) 677-7808

Record ID: 190092EN

Service Type: NON Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: IMPACT DRUG AND ALCOHOL TREATMENT CENTER

Legal Name: PRINCIPLES, INC.

Address: 1680 NORTH FAIR OAKS AVENUE

City, State Zip: PASADENA, CA 91103

Phone: (626) 798-0884 Fax: (626) 798-6970

Record ID: 190094AN
Service Type: RES-DETOX
Resident Capacity: 130
Total Occupancy: 130
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: IMPACT OUTPATIENT/AFTERCARE PROGRAM

Legal Name: PRINCIPLES, INC.

Address: 1450 NORTH LAKE AVENUE,

SUITE 200

City, State Zip: PASADENA, CA 91104

Phone: (626) 564-4240 Fax: (626) 577-4250

Record ID: 190094GN

Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: PRINCIPLES, INC., D.B.A. IMPACT

Legal Name: PRINCIPLES, INC.

Address: 333 SOUTH CENTRAL AVENUE City, State Zip: LOS ANGELES, CA 90013

Phone: (213) 625-5009 Fax: (213) 577-4250

Record ID: 190094HN

Service Type: NON
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: CRI-HELP, PFLEGER RESIDENTIAL

Legal Name: CRI-HELP, INC.

Address: 11027 BURBANK BOULEVARD City, State Zip: NORTH HOLLYWOOD, CA 91601

Phone: (818) 985-8323 Fax: (818) 506-7066

Record ID: 190095AN
Service Type: RES-DETOX
Resident Capacity: 135
Total Occupancy: 135

Expiration Date: 12/31/2017 IMS: No

Program Name: CRI-HELP - PFLEGER OUTPATIENT

Legal Name: CRI-HELP, INC.

Address: 8330 LANKERSHIM BOULEVARD City, State Zip: NORTH HOLLYWOOD, CA 91605

1.1

Phone: (818) 985-8323

Record ID: 190095KN
Service Type: NON
Target Population: 1.1

Target Population:

Expiration Date: 12/31/2017 IMS: No

Program Name: SOCORRO

Legal Name: CRI-HELP, INC.

Address: 2010 NORTH LINCOLN PARK AVENUE City, State Zip: LINCOLN HEIGHTS, CA 90031

Phone: (323) 222-1440

Record ID: 190095MN
Service Type: RES
Resident Capacity: 41
Total Occupancy: 41
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: SOCORRO

Legal Name: CRI-HELP, INC.
Address: 2029 KEITH STREET
City, State Zip: LOS ANGELES, CA 90031

Phone: (323) 222-6509
Record ID: 190095NN

Record ID: 1900 Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: BROWN SCAPULAR PROGRAM

Legal Name: CANON HUMAN SERVICES CENTERS, INC.

Address: 9705 SOUTH HOLMES AVENUE City, State Zip: LOS ANGELES, CA 90002

Phone: (323) 249-9097 Fax: (323) 249-9121

Record ID: 190099DN

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: BROWN SCAPULAR PROGRAM

Legal Name: CANON HUMAN SERVICES CENTERS, INC.

Address: 9705 SOUTH HOLMES AVENUE City, State Zip: LOS ANGELES, CA 90002

Phone: (323) 249-9097 Fax: (323) 249-9121

Record ID: 190099EN

Service Type: RES
Resident Capacity: 43
Total Occupancy: 43
Target Population: 1.2

Expiration Date: 2/28/2018 IMS: No

Program Name: L.A. CADA

Legal Name: LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE

Address: 11015 BLOOMFIELD AVENUE

City, State Zip: SANTA FE SPRINGS, CA 90670-4601

Phone: (562) 906-2676 Fax: (562) 906-2681

Record ID: 190100BN
Service Type: NON
Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: L.A. CADA

Legal Name: LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE

Address: 470 EAST THIRD STREET,

SUITES A AND B

City, State Zip: LOS ANGELES, CA 90013

Phone: (213) 626-6411 Fax: (562) 906-2676

Record ID: 190100EN
Service Type: NON
Target Population: 1.7

Expiration Date: 1/31/2018 IMS: No

Program Name: ALLEN HOUSE

Legal Name: LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE

Address: 10425 SOUTH PAINTER AVENUE City, State Zip: SANTA FE SPRINGS, CA 90670

Phone: (562) 906-2685 Fax: (562) 236-9899

Record ID: 190100IN
Service Type: RES-DETOX
Pasident Capacity: 48

Resident Capacity: 48
Total Occupancy: 60
Target Population: 1.9

Expiration Date: 11/30/2018 IMS: No

Program Name: H.O.W. HOUSE

Legal Name: LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE Address: 14100, 14100 1/4, 14100 1/2, GLENGYLE STREET

City, State Zip: WHITTIER, CA 90604

Phone: (562) 777-1222 Fax: (562) 906-1222

Record ID: 190100LN

Service Type: RES Resident Capacity: 18 Total Occupancy: 19 Target Population: 1.2

Expiration Date: 8/31/2018 IMS: No

Program Name: SUNRISE COMMUNITY COUNSELING CENTER Legal Name: SUNRISE COMMUNITY COUNSELING CENTER

Address: 537 SOUTH ALVARADO STREET City, State Zip: LOS ANGELES, CA 90057-2903

Phone: (213) 207-2770 Fax: (213) 417-9834

Record ID: 190110CN
Service Type: NON

Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name:VAN NESS RECOVERY HOUSELegal Name:VAN NESS RECOVERY HOUSEAddress:1919 NORTH BEACHWOOD DRIVECity, State Zip:LOS ANGELES, CA 90068

Phone: (323) 463-4266 Fax: (323) 962-6721

Record ID: 190111AN

Service Type: RES Resident Capacity: 20 Total Occupancy: 20 Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: ASIAN AMERICAN DRUG ABUSE PROGRAM

Legal Name: ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.

Address: 5318 SOUTH CRENSHAW BOULEVARD

City, State Zip: LOS ANGELES, CA 90043

Phone: (323) 293-6291 Fax: (323) 293-1091

Record ID: 190112AN

Service Type: RES
Resident Capacity: 29
Total Occupancy: 31
Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: ASIAN AMERICAN DRUG ABUSE PROGRAM

Legal Name: ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.

Address: 1088 SOUTH LA BREA AVENUE

City, State Zip: LOS ANGELES, CA 90019

Phone: (323) 295-0262 Fax: (323) 295-2533

Record ID: 190112CN
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: ASIAN-AMERICAN DRUG ABUSE PROGRAM

Legal Name: ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.

Address: 520 NORTH LA BREA,

SUITE 209

City, State Zip: INGLEWOOD, CA 90302

Phone: (323) 294-4932 Fax: (323) 294-2533

Record ID: 190112DN

Service Type: NON

Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.

Legal Name: ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.

Address: 13931 SOUTH VAN NESS AVENUE

City, State Zip: GARDENA, CA 90249

Phone: (310) 768-8018 Fax: (310) 768-4170

Record ID: 190112EN

Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: ASIAN AMERICAN DRUG ABUSE PROGRAM, INC. Legal Name: ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.

Address: 5825 W. OLYMPIC BLVD.
City, State Zip: LOS ANGELES, CA 90036

Phone: (323) 933-9022 Fax: (323) 933-4029

Record ID: 190112FN

Service Type: DSS Target Population: 1.5

Expiration Date: 9/30/2018 IMS: No

Program Name: PHOENIX HOUSE - VENICE

Legal Name: PHOENIX HOUSES OF LOS ANGELES, INC.

Address: 503 OCEAN FRONT WALK City, State Zip: VENICE, CA 90291

Phone: (310) 392-3070 Fax: (310) 392-9068

Record ID: 190115AN
Service Type: RES-DETOX

Resident Capacity: 53
Total Occupancy: 53
Target Population: 1.2

Expiration Date: 12/31/2017 IMS: No

Program Name: PHOENIX HOUSES OF LOS ANGELES

Legal Name: PHOENIX HOUSES OF LOS ANGELES, INC.

Address: 11600 ELDRIDGE AVENUE

City, State Zip: LAKE VIEW TERRACE, CA 91342

Phone: (818) 686-3013

Record ID: 190115BN
Service Type: DSS
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: PHOENIX HOUSE: OUTPATIENT SERVICES
Legal Name: PHOENIX HOUSES OF LOS ANGELES, INC.

Address: 503 OCEAN FRONT WALK City, State Zip: VENICE, CA 90291

Phone: (310) 392-3070 Fax: (310) 392-9068

Record ID: 190115CN
Service Type: NON
Target Population: 1.2

Expiration Date: 12/31/2017 IMS: No

Program Name: PHOENIX HOUSE ACADEMY OUTPATIENT CENTER

Legal Name: PHOENIX HOUSES OF LOS ANGELES, INC

Address: 11600 ELDRIDGE AVENUE

City, State Zip: LAKE VIEW TERRACE, CA 91342

Phone: (818) 686-3170

Record ID: 190115DN
Service Type: NON
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: FRED BROWN'S RECOVERY SERVICES, INC.
Legal Name: FRED BROWN'S RECOVERY SERVICES, INC.

Address: 270 WEST 14TH STREET City, State Zip: SAN PEDRO, CA 90731

Phone: (310) 519-8723 Fax: (310) 519-9428

Record ID: 190135CN

Service Type: RES
Resident Capacity: 14
Total Occupancy: 14
Target Population: 1.2

Expiration Date: 11/30/2018 IMS: No

Program Name: FRED BROWN'S RECOVERY SERVICES, INC.
Legal Name: FRED BROWN'S RECOVERY SERVICES, INC.

Address: 856 WEST 19TH STREET City, State Zip: SAN PEDRO, CA 90731

Phone: (310) 548-1196 Fax: (310) 519-9428

Record ID: 190135EN

Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: FRED BROWN'S RECOVERY SERVICES

Legal Name: FRED BROWN'S RECOVERY SERVICES, INC.

Address: 278 WEST 14TH STREET City, State Zip: SAN PEDRO, CA 90731

Phone: (310) 519-8723 Fax: (310) 519-9428

Record ID: 190135IN

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 2/28/2018 IMS: No

Program Name: FRED BROWN'S RECOVERY SERVICES
Legal Name: FRED BROWN'S RECOVERY SERVICES, INC.

Address: 276 WEST 14TH STREET City, State Zip: SAN PEDRO, CA 90731

Phone: (310) 519-8723 Fax: (310) 519-9428

Record ID: 190135JN

Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.2

Expiration Date: 2/28/2018 IMS: No

Program Name: FRED BROWN'S RECOVERY SERVICES

Legal Name: FRED BROWN'S RECOVERY SERVICES, INC.

Address: 270 WEST 14TH STREET,

#3

City, State Zip: SAN PEDRO, CA 90731

Phone: (310) 519-8723 Fax: (310) 519-9428

Record ID: 190135MN
Service Type: NON
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: S. H. A. W. L. HOUSE

Legal Name: SUPPORT FOR HARBOR AREA WOMEN'S LIVES

Address: 936 SOUTH CENTRE STREET City, State Zip: SAN PEDRO, CA 90731

Phone: (310) 521-9310 Fax: (310) 521-9310

Record ID: 190147AN

Service Type: RES
Resident Capacity: 13
Total Occupancy: 13
Target Population: 1.12

Expiration Date: 6/30/2019 IMS: No

Program Name: OASIS WOMEN'S RECOVERING COMMUNITY
Legal Name: OASIS WOMEN'S RECOVERING COMMUNITY

Address: 13832 POLK STREET

City, State Zip: SYLMAR, CA 91342

Phone: (818) 362-0986 Fax: (818) 833-0922

Record ID: 190155BN

Service Type: RES Resident Capacity: 14 Total Occupancy: 17 Target Population: 1.3

Expiration Date: 8/31/2019 IMS: No

Program Name: DARE U TO CARE OUTREACH MINISTRY
Legal Name: DARE U TO CARE OUTREACH MINISTRY

Address: 1004 WEST 120TH STREET City, State Zip: LOS ANGELES, CA 90044

Phone: (323) 208-7575 Fax: (323) 777-2872

Record ID: 190182DN

Service Type: NON Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: DARE U TO CARE OUTREACH MINISTRY
Legal Name: DARE U TO CARE OUTREACH MINISTRY

Address: 316 WEST 120TH STREET City, State Zip: LOS ANGELES, CA 90061

Phone: (323) 777-2372 Fax: (323) 777-2488

Record ID: 190182EN

Service Type: RES
Resident Capacity: 20
Total Occupancy: 21
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: NEW FOUND LIFE
Legal Name: NEW FOUND LIFE,

Legal Name: NEW FOUND LIFE, INC.

Address: 2211, 2213, 2135 AND 2137 EAST OCEAN BOULEVARD

City, State Zip: LONG BEACH, CA 90803-2440

Phone: (562) 434-4060 Fax: (562) 987-3924

Record ID: 190184AP
Service Type: RES
Resident Capacity: 30
Total Occupancy: 30
Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: WESTSIDE RESIDENCE HALL

Legal Name: UNITED STATES VETERANS INITIATIVE

Address: 733 SOUTH HINDRY AVE.

SUITES 203, 208, 209, 210, AND 211

City, State Zip: INGLEWOOD, CA 90301

Phone: (310) 348-7600 Fax: (310) 641-2661

Record ID: 190188AN
Service Type: RES
Resident Capacity: 50
Total Occupancy: 50
Target Population: 1.2

Expiration Date: 4/30/2018 IMS: No

Program Name: CROSSROADS

Legal Name: CROSSROADS, INCORPORATED

Address: 1269 NORTH HARVARD AVE.; 615 SAN JOSE AVE.;

AND 250 W. 1ST ST., SUITE 254 $\,$

City, State Zip: CLAREMONT, CA 91711-0015

Phone: (909) 626-7847 Fax: (909) 626-7867

Record ID: 190205AN
Service Type: RES
Resident Capacity: 12
Total Occupancy: 14
Target Population: 1.3

Expiration Date: 9/30/2019 IMS: No

Program Name: SSG HOP-ICS

Legal Name: SPECIAL SERVICE FOR GROUPS, INC.

Address: 5715 SOUTH BROADWAY
City, State Zip: LOS ANGELES, CA 90037

Phone: (323) 948-0444 Fax: (323) 948-0443

Record ID: 190210BN Service Type: NON

Target Population: 1.5

Expiration Date: 3/31/2019 IMS: No

Program Name: PACIFIC ASIAN ALCOHOL AND DRUG PROGRAM

Legal Name: SPECIAL SERVICE FOR GROUPS, INC.

Address: 2001 BEVERLY BOULEVARD,

SUITE 201

City, State Zip: LOS ANGELES, CA 90057

Phone: (213) 413-1622 Fax: (213) 413-5456

Record ID: 190210CN

Service Type: NON Target Population: 1.5

Expiration Date: 12/31/2018 IMS: No

Program Name: SSG WEBER COMMUNITY CENTER

Legal Name: SPECIAL SERVICE FOR GROUPS, INC.

Address: 5849 SOUTH CROCKER STREET City, State Zip: LOS ANGELES, CA 90003

Phone: (323) 234-4445 Fax: (213) 553-1822

Record ID: 190210EN

Service Type: NON Target Population: 1.5

Expiration Date: 7/31/2019 IMS: No

Program Name: CREATIVE CARE - MALIBU Legal Name: CREATIVE CARE, INC.

Address: 5909, 5927, 5941 AND 5947 TRANCAS CANYON ROAD

City, State Zip: MALIBU, CA 90265

Phone: (818) 223-9334 Fax: (310) 589-5547

Record ID: 190226AP RES-DETOX Service Type:

Resident Capacity: 24 Total Occupancy: 24 Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: DAY TREATMENT AND OUTPATIENT ALCOHOL AND/OR OTHER DRUG SERVICES

Legal Name: EL PROYECTO DEL BARRIO, INC. Address: 9140 VAN NUYS BOULEVARD,

SUITES 104-107, 201, 203, AND 208-211

PANORAMA CITY, CA 91402 City, State Zip:

Phone: (818) 895-2206 Fax: (818) 895-0824

Record ID: 190236BN Service Type: NON Target Population: 1.1

7/31/2019 Expiration Date: IMS: No

Program Name: ARK OUTPATIENT DRUG FREE SERVICES/DRUG COURT

Legal Name: SHIELDS FOR FAMILIES

Address: 11705 DEPUTY YAMAMOTO PLACE,

SUITE A

LYNWOOD, CA 90262 City, State Zip:

Phone: (323) 357-6930 Fax: (323) 569-1979

Record ID: 190238CN Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: GENESIS FAMILY DAY TREATMENT PROGRAM

Legal Name: SHIELDS FOR FAMILIES

Address: 12021 SOUTH WILMINGTON AVENUE,

LOT C

LOS ANGELES, CA 90059 City, State Zip:

(310) 668-8260 Phone: Record ID: 190238DN

Service Type: NON Target Population: 1.7

Expiration Date: 3/31/2019 IMS: No

EXODUS FAMILY DAY TREATMENT PROGRAM Program Name:

SHIELDS FOR FAMILIES Legal Name:

Address: 1500 EAST KAY STREET, UNITS 100, 1704, 1708, 1710, 1712, 1714, 1716, 1720,

1736, 1740, 1746, AND 1762

COMPTON, CA 90221 City, State Zip:

(310) 898-2450 (310) 898-2452 Phone: Fax:

Record ID: 190238EN

Service Type: NON Target Population: 1.7

Expiration Date: 5/31/2019 IMS: No

Program Name: EDEN DUAL DIAGNOSIS PROGRAM

Legal Name: SHIELDS FOR FAMILIES Address: 2620 INDUSTRY WAY,

SUITE A

City, State Zip: LYNWOOD, CA 90262

Phone: (323) 242-5000 (323) 242-5011 Fax:

Record ID: 190238FN

Service Type: NON Target Population: 1.7

3/31/2019

Expiration Date: IMS: No

SHIELDS FOR FAMILIES - MT. CARMEL TREATMENT CENTER Program Name:

Legal Name: SHIELDS FOR FAMILIES 801 WEST 70TH STREET Address: City, State Zip: LOS ANGELES, CA 90044

Phone: (323) 242-5000 Fax: (323) 242-5011

Record ID: 190238GN

Service Type: RES Resident Capacity: 46 Total Occupancy: 46 Target Population: 1.1

Expiration Date: 3/31/2018 IMS:

Program Name: AMERICAN INDIAN CHANGING SPIRITS Legal Name: AMERICAN INDIAN CHANGING SPIRITS

Address: 2120 W. WILLIAMS STREET,

BUILDING 1 AND 2

City, State Zip: LONG BEACH, CA 90810

Phone: (562) 388-8118 Fax: (562) 799-1807

Record ID: 190239AN Service Type: RES

Resident Capacity: 16 Total Occupancy: 16 Target Population: 1.2

Expiration Date: 3/31/2018 TMS: No

NATIONAL COUNCIL ON ALCOHOLISM AND Program Name:

DRUG DEPENDENCE OF EAST SAN GABRIEL AND POMON

NATIONAL COUNCIL ON ALCOHOLISM AND Legal Name:

DRUG DEPENDENCE OF EAST SAN GABRIEL AND POMON

Address: 656 NORTH PARK AVENUE City, State Zip: POMONA, CA 91768

Phone: (909) 629-4084 Fax: (909) 629-4086

Record ID: 190241BN NON Service Type: Target Population: 1.1

Expiration Date: 7/31/2018 TMS: Nο

NATIONAL COUNCIL ON ALCOHOLISM & Program Name:

DRUG DEPENDENCE OF EAST SAN GABRIEL & POMONA

NATIONAL COUNCIL ON ALCOHOLISM AND Legal Name:

DRUG DEPENDENCE OF EAST SAN GABRIEL AND POMON

Address: 4626 NORTH GRAND AVENUE

COVINA, CA 91724 City, State Zip:

(626) 331-5316 Phone: (626) 332-2219 Fax:

Record ID: 190241CN

Service Type: NON

Target Population: 1.1

Expiration Date: 3/31/2018 TMS: No

Program Name: INTEGRATED TREATMENT PROGRAM FOR CO-OCCURRING DISORDERS

HOMELESS HEALTH CARE LOS ANGELES Legal Name:

Address: 2330 BEVERLY BOULEVARD City, State Zip: LOS ANGELES, CA 90057

Phone: (213) 744-0724 (213) 749-2432 Fax:

Record ID: 190246AN

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

SPIRITT FAMILY SERVICES Program Name: Legal Name: SPIRITT FAMILY SERVICES Address: 8000 PAINTER AVENUE City, State Zip: WHITTIER, CA 90602

Phone: (562) 903-7000 Fax: (502) 903-7707

Record ID: 190247BN

NON Service Type: Target Population: 1.5

Expiration Date: 12/31/2018

IMS: No Program Name: SPIRITT FAMILY SERVICES
Legal Name: SPIRITT FAMILY SERVICES
Address: 2000 TYLER AVENUE

City, State Zip: SOUTH EL MONTE, CA 91733

Phone: (626) 968-0091 Fax: (626) 968-0041

Record ID: 190247CN
Service Type: NON
Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: SPIRITT FAMILY SERVICES
Legal Name: SPIRITT FAMILY SERVICES
Address: 147 SOUTH SIXTH AVENUE
City, State Zip: LA PUENTE, CA 91746
Phone: (626) 968-0041

Record ID: 190247DN
Service Type: NON
Target Population: 1.5

Expiration Date: 12/31/2018 IMS: No

Program Name: PASADENA RECOVERY CENTER

Legal Name: PASADENA RECOVERY CENTER, INC. Address: 1811 NORTH RAYMOND AVENUE City, State Zip: PASADENA, CA 91103-1840

Phone: (626) 345-9992 Fax: (626) 345-9995

Record ID: 190250AP
Service Type: RES-DETOX
Resident Capacity: 88
Total Occupancy: 88

Total Occupancy: 88
Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: PACIFIC CLINICS SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES

Legal Name: PACIFIC CLINICS

Address: 11721 A TELEGRAPH ROAD

City, State Zip: SANTA FE SPRINGS, CA 90670-3691

Phone: (626) 254-5000 Fax: (562) 949-4807

Record ID: 190254KN

Service Type: NON Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: AMITY FOUNDATION-AMISTAD DE LOS ANGELES

Legal Name: EPIDAURUS

Address: 3735, 3739 AND 3745 SOUTH GRAND AVENUE

City, State Zip: LOS ANGELES, CA 90007

Phone: (213) 743-9078 Fax: (213) 748-5102

Record ID: 190259AN

Service Type: RES
Resident Capacity: 184
Total Occupancy: 184
Target Population: 1.2

Expiration Date: 5/31/2019 IMS: No

Program Name: AMITY FOUNDATION

Legal Name: EPIDAURUS

Address: 3750 SOUTH GRAND AVENUE City, State Zip: LOS ANGELES, CA 90007

Phone: (213) 743-9075 Fax: (866) 763-2186

Record ID: 190259CN

Service Type: NON
Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name:THE HIGH ROAD PROGRAMLegal Name:THE HIGH ROAD PROGRAMAddress:700 SOUTH ARROYO PARKWAY

City, State Zip: PASADENA, CA 91105

Phone: (626) 793-6159 Fax: (626) 795-9540

Record ID: 190262AN
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name:THE HIGH ROAD PROGRAMLegal Name:THE HIGH ROAD PROGRAMAddress:14430 SHERMAN WAYCity, State Zip:VAN NUYS, CA 91405

Phone: (818) 785-9119 Fax: (818) 785-2150

Record ID: 190262BN
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: SOUTH BAY HUMAN SERVICES

Legal Name: SOUTH BAY HUMAN SERVICES COALITION, INC.

Address: 2370 WEST CARSON STREET,

SUITE 136

City, State Zip: TORRANCE, CA 90501 Phone: (310) 328-0780

Record ID: 190268AN Service Type: NON

Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: MENLO HOUSE RESIDENTIAL
Legal Name: SADLER HEALTHCARE, INC.
Address: 1731 SOUTH MENLO AVENUE
City, State Zip: LOS ANGELES, CA 90006

Phone: (323) 734-3284 Fax: (323) 724-0019

Record ID: 190279CP

Service Type: RES
Resident Capacity: 30
Total Occupancy: 30
Target Population: 1.2

Expiration Date: 12/31/2018 IMS: No

Program Name: MARIPOSA HOUSE

Legal Name: SADLER HEALTHCARE, INC.
Address: 220 N. NORMANDIE AVENUE AND

225 N. MARIPOSA AVENUE LOS ANGELES, CA 90004

City, State Zip: LOS ANGELES, CA 90004

Phone: (213) 220-4482

Record ID: 190279DP
Service Type: RES
Resident Capacity: 48
Total Occupancy: 48
Target Population: 1.2

Expiration Date: 3/31/2019 IMS: No

Program Name: PASSAGES

Legal Name: GRASSHOPPER HOUSE LLC Address: 6428 MEADOWS COURT City, State Zip: MALIBU, CA 90265

Phone: (310) 589-2880 Fax: (310) 464-0663

Record ID: 190283AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: PASSAGES C

Legal Name: GRASSHOPPER HOUSE LLC
Address: 6439 SYCAMORE MEADOWS DRIVE

City, State Zip: MALIBU, CA 90265

Phone: (310) 589-2880 Fax: (310) 464-0663

Record ID: 190283CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: PASSAGES VISTA HOUSE
Legal Name: GRASSHOPPER HOUSE LLC
Address: 6380 MEADOWS COURT
City, State Zip: MALIBU, CA 90265

Phone: (310) 589-2880 Fax: (310) 464-6592

Record ID: 190283DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: PASSAGES

Legal Name: GRASSHOPPER HOUSE LLC Address: 6447 SYCAMORE MEADOWS DRIVE

City, State Zip: MALIBU, CA 90265

Phone: (310) 589-2880 Fax: (310) 464-0663

Record ID: 190283FP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: BIENVENIDOS COMMUNITY HEALTH CENTER
Legal Name: BIENVENIDOS COMMUNITY HEALTH CENTER
Address: 501-507 SOUTH ATLANTIC BOULEVARD

City, State Zip: LOS ANGELES, CA 90022

Phone: (323) 268-9191 Fax: (323) 268-9119

Record ID: 190285AN Service Type: NON

Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: THE NESS COUNSELING CENTER

Legal Name: THE NESS COUNSELING CENTER, INC.

Address: 8512 WHITWORTH DRIVE City, State Zip: LOS ANGELES, CA 90035

Phone: (310) 360-8512 Fax: (310) 360-8510

Record ID: 190286AN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: MJB RECOVERY, INC.

Legal Name: MJB TRANSITIONAL RECOVERY, INC.

Address: 11152 SOUTH MAIN STREET City, State Zip: LOS ANGELES, CA 90061

Phone: (323) 777-2491 Fax: (323) 777-0426

Record ID: 190288BN

Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: POSITIVE STEPS, INC.
Legal Name: POSITIVE STEPS, INC.
Address: 5230 NORTH CLARK AVENUE,

SUITE 18

City, State Zip: LAKEWOOD, CA 90712

Phone: (562) 804-2700 Fax: (562) 496-2104

Record ID: 190289AP
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: TWIN TOWN TREATMENT CENTERS - TORRANCE

Legal Name: TWIN TOWN CORPORATION

Address: 20300 S. VERMONT AVENUE, SUITE 245

City, State Zip: TORRANCE, CA 90502

Phone: (310) 787-1335 Fax: (562) 493-1280

Record ID: 190290AP
Service Type: NON
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: TWIN TOWN TREATMENT CENTERS - NORTH HOLLYWOOD

Legal Name: TWIN TOWN CORPORATION

Address: 6180 LAUREL CANYON BOULEVARD, SUITE 275

City, State Zip: NORTH HOLLYWOOD, CA 91606

Phone: (818) 985-0560 Fax: (562) 493-1280

Record ID: 190290BP Service Type: NON

Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: TWIN TOWN TREATMENT CENTERS, WEST HOLLYWOOD

Legal Name: TWIN TOWN CORPORATION
Address: 8739 SANTA MONICA BOULEVARD
City, State Zip: WEST HOLLYWOOD, CA 90069

Phone: (562) 493-1280 Fax: (310) 854-0134

Record ID: 190290CP

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: MATRIX INSTITUTE

Legal Name: MATRIX INSTITUTE ON ADDICTIONS Address: 20301 VENTURA BOULEVARD, SUITE 121

City, State Zip: WOODLAND HILLS, CA 91364

Phone: (818) 226-6070 Fax: (818) 704-8948

Record ID: 190297AN
Service Type: NON

Service Type: NON Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: MATRIX INSTITUTE

Legal Name: MATRIX INSTITUTE ON ADDICTIONS
Address: 1849 SAWTELLE BOULEVARD, SUITE 100

City, State Zip: LOS ANGELES, CA 90025

Phone: (310) 478-8305 Fax: (310) 478-8639

Record ID: 190297BN Service Type: NON

Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: ACTION FAMILY COUNSELING, INC-RANCH

Legal Name: ACTION FAMILY COUNSELING, INC. Address: 30035 BOUOUET CANYON ROAD

City, State Zip: SAUGUS, CA 91350

Phone: (661) 297-9705 Fax: (661) 297-9701

Record ID: 190315DP
Service Type: NON

Target Population: 1.5

Expiration Date: 8/31/2018 IMS: No

ACTION FAMILY COUNSELING, INC. Program Name: Legal Name: ACTION FAMILY COUNSELING, INC. 22722 SOLEDAD CANYON ROAD Address:

City, State Zip: SANTA CLARITA, CA 91350

(661) 297-9716 (661) 297-9701 Phone: Fax:

Record ID: 190315FP Service Type: NON Target Population: 1.1

2/28/2018 Expiration Date: IMS: No

ACTION FAMILY COUNSELING, INC., ADULT RESIDENTIAL UNIT Program Name:

ACTION FAMILY COUNSELING, INC. Legal Name: Address: 30010 BOUQUET CANYON ROAD

City, State Zip: SANTA CLARITA, CA 91390

(800) 367-8336 Phone: Fax: (661) 297-9701

Record ID: 190315HP

Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 3/31/2018 IMS:

I-ADARP, (INTER-AGENCY DRUG ABUSE RECOVERY PROGRAM) Program Name:

Legal Name: I-ADARP, INC.

Address: 8330 LANKERSHIM BOULEVARD, 1ST FLOOR

City, State Zip: NORTH HOLLYWOOD, CA 91605

Phone: (818) 994-7454 Fax: (818) 252-1410

Record ID: 190321AN Service Type: NON

Target Population: 1.9

Expiration Date: 10/31/2017 IMS:

Program Name: BEIT T'SHUVAH Legal Name: BEIT T'SHUVAH

Address: 8831 VENICE BOULEVARD City, State Zip: LOS ANGELES, CA 90034

(310) 204-5200 Phone: Fax: (310) 202-2294

Record ID: 190326AN

RES Service Type: Resident Capacity: 98 Total Occupancy: 120 Target Population: 1.1

12/31/2019 IMS: Expiration Date: No

Program Name: ALTERNATIVE OPTIONS INTENSIVE OUTPATIENT PROGRAM

FOR ALCOHOL & SUBSTANCE ABUSE

Legal Name: ALTERNATIVE OPTIONS COUNSELING CENTER, INC.

17326 EDWARDS ROAD, SUITE A115 Address:

CERRITOS, CA 90703 City, State Zip:

Phone: (562) 921-5701 Fax: (562) 921-5703

Record ID: 190340BN

Service Type: NON Target Population: 1.1

IMS: Expiration Date: 5/31/2019 No

Program Name: FIRST TO SERVE, INC.

Legal Name: FIRST TO SERVE Address: 4052 BUDLONG AVENUE City, State Zip: LOS ANGELES, CA 90037

(323) 758-4011 Phone: (323) 595-7502 Fax:

Record ID: 190342CN

Service Type: RES Resident Capacity: 28 Total Occupancy: 28 Target Population: 1.1

10/31/2018 IMS: Expiration Date: No Program Name: VALLEY COMMUNITY HEALTHCARE DRUG AND ALCOHOL TREATMENT PROGRAM

Legal Name: VALLEY COMMUNITY HEALTHCARE
Address: 6801 COLDWATER CANYON AVENUE
City, State Zip: NORTH HOLLYWOOD, CA 91605-5104

Phone: (818) 763-1718 Fax: (818) 763-7231

Record ID: 190349AN Service Type: NON

Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: STORK CLUB - OPTIONS FOR RECOVERY AT

HARBOR UCLA RESEARCH AND EDUCATION INSTITUTE

Legal Name: LOS ANGELES BIOMEDICAL RESEARCH INSTITUTE AT HARBOR-UCLA MEDICAL CENTER

Address: 1124 WEST CARSON STREET, BUILDING N-33

City, State Zip: TORRANCE, CA 90502

Phone: (310) 222-5410 Fax: (310) 787-7742

Record ID: 190351AN
Service Type: NON
Target Population: 1.3

Expiration Date: 8/31/2018 IMS: No

Program Name: CAMBODIAN ASSOCIATION OF AMERICA, COMMUNITY PREVENTION AND RECOVERY PROGRAM

Legal Name: CAMBODIAN ASSOCIATION OF AMERICA

Address: 2501 ATLANTIC AVENUE City, State Zip: LONG BEACH, CA 90806

Phone: (562) 988-1863 Fax: (562) 427-1678

Record ID: 190358AN Service Type: NON

Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name:ROBERT SUNDANCE FAMILY WELLNESS CENTERLegal Name:UNITED AMERICAN INDIAN INVOLVEMENT, INC.Address:1125 WEST 6TH STREET, SUITES 103 AND 303

City, State Zip: LOS ANGELES, CA 90017

Phone: (213) 202-3970 Fax: (213) 202-3977

Record ID: 190364AN Service Type: NON

Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: CLINICA MSR. OSCAR A. ROMERO
Legal Name: CLINICA MSR. OSCAR A ROMERO

Address: 2032 MARENGO STREET

SUITE B

City, State Zip: LOS ANGELES, CA 90033

Phone: (213) 989-7700 Fax: (213) 989-7701

Record ID: 190368AN

Service Type: NON Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: ANTELOPE VALLEY COUNCIL ON ALCOHOLISM & DRUG DEPENDENCY
Legal Name: ANTELOPE VALLEY COUNCIL ON ALCOHOLISM & DRUG DEPENDENCY

Address: 311 EAST AVENUE K-4 City, State Zip: LANCASTER, CA 93535

Phone: (661) 948-5046 Fax: (661) 948-5049

Record ID: 190376AN

Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: HOUSE OF UHURU

Legal Name: WATTS HEALTHCARE CORPORATION
Address: 8005 SOUTH FIGUEROA STREET

City, State Zip: LOS ANGELES, CA 90003

Phone: (323) 568-5400 Fax: (323) 752-8031

Record ID: 190377AN Service Type: RES

Resident Capacity: 66
Total Occupancy: 66
Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: HOUSE OF UHURU

Legal Name: WATTS HEALTHCARE CORPORATION
Address: 8005 SOUTH FIGUEROA STREET

City, State Zip: LOS ANGELES, CA 90003

Phone: (323) 568-5400 Fax: (323) 752-8031

Record ID: 190377BN
Service Type: NON
Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: HELPLINE YOUTH COUNSELING

Legal Name: HELPLINE YOUTH COUNSELING

Address: 14181 TELEGRAPH ROAD, WEST WING

City, State Zip: WHITTIER, CA 90604

Phone: (562) 273-0722 Fax: (562) 946-3641

Record ID: 190386AN

Service Type: NON

Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: NEW PERCEPTIONS

Legal Name: NEW PERCEPTIONS, INC. Address: 17826 ROMER STREET City, State Zip: NORTHRIDGE, CA 91325

Phone: (818) 943-2175 Fax: (818) 885-9595

Record ID: 190416AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: MCINTYRE HOUSE

Legal Name: MCINTYRE HOUSE

Address: 544 NORTH KENMORE AVENUE City, State Zip: LOS ANGELES, CA 90004

Phone: (323) 662-0855 Fax: (323) 622-0842

Record ID: 190420AN

Service Type: RES
Resident Capacity: 16
Total Occupancy: 19
Target Population: 1.2

Expiration Date: 6/30/2018 IMS: No

Program Name: CLEARVIEW TREATMENT PROGRAMS

Legal Name: CLEARVIEW CENTERS, LLC

Address: 2432 AND 2432 1/2 WALNUT AVENUE

City, State Zip: VENICE, CA 90291

Phone: (310) 862-8980 Fax: (310) 862-8822

Record ID: 190438AP

Service Type: RES-DETOX

Resident Capacity: 9
Total Occupancy: 9
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: CLEARVIEW TREATMENT PROGRAMS

Legal Name: CLEARVIEW CENTERS, LLC
Address: 2435 GLYNDON AVENUE
City, State Zip: VENICE, CA 90291

Phone: (310) 305-2691 Fax: (310) 305-2693

Record ID: 190438CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: CLEARVIEW TREATMENT PROGRAMS

Legal Name: CLEARVIEW CENTERS, LLC
Address: 2427 WALNUT AVENUE
City, State Zip: VENICE, CA 90291

Phone: (310) 448-8822 Fax: (310) 448-8833

Record ID: 190438DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name:THE CANYON AT PEACE PARKLegal Name:THE CANYON AT PEACE PARKAddress:2890 AND 2900 KANAN DUME ROAD

City, State Zip: MALIBU, CA 90265

Phone: (310) 457-3209 Fax: (310) 457-4440

Record ID: 190441AP
Service Type: RES-DETOX

Resident Capacity: 16 Total Occupancy: 16 Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: CENTER FOR INTEGRATED FAMILY AND HEALTH SERVICES (THE FAMILY CENTER)

Legal Name: CENTER FOR INTEGRATED FAMILY AND HEALTH SERVICES, INCORPORATED

Address: 540 SOUTH EREMLAND DRIVE, SUITES A-D

City, State Zip: COVINA, CA 91723

Phone: (626) 967-5103 Fax: (626) 967-1339

Record ID: 190442AN

Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: ALCOHOL & DRUG PROGRAM
Legal Name: CHILD & FAMILY CENTER
Address: 21545 CENTRE POINTE PARKWAY
City, State Zip: SANTA CLARITA, CA 91350

Phone: (661) 259-9439 Fax: (661) 259-9658

Record ID: 190459AN

Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: ABSOLUTE CONTROL TRANSITIONAL COUNSELING CENTER

Legal Name: ABSOLUTE CONTROL TRANSITIONAL COUNSELING CENTER INC.

Address: 3111 WINONA AVENUE, SUITE 201

City, State Zip: BURBANK, CA 91504

Phone: (626) 792-8797 Fax: (626) 792-8798

Record ID: 190462AN

Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: SUBSTANCE ABUSE PREVENTION AND TREATMENT PROGRAM,

DIV. OF ADOLESCENT MED., CHILD

Legal Name: CHILDREN'S HOSPITAL LOS ANGELES

Address: 5000 SUNSET BOULEVARD, 7TH FLOOR, SUITE 701

City, State Zip: LOS ANGELES, CA 90027

Phone: (323) 361-2463 Fax: (323) 913-7951

Record ID: 190473AN
Service Type: NON
Target Population: 1.5

Expiration Date: 5/31/2019 IMS: No

Program Name: CLIFFSIDE MALIBU
Legal Name: CLIFFSIDE MALIBU
Address: 30060 ANDROMEDA LANE
City, State Zip: MALIBU, CA 90265

Phone: (310) 589-2800 Fax: (310) 589-2802

Record ID: 190474AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: INGLEWOOD AREA ALCOHOL AND DRUG PROGRAM
Legal Name: LEWIS PROFESSIONAL SERVICES, INCORPORATED

Address: 400 SOUTH LA BREA, SUITE # 101,102, 200, 202, 203, 204 AND 205

City, State Zip: INGELWOOD, CA 90301

Phone: (310) 674-6267 Fax: (310) 673-5904

Record ID: 190480AP
Service Type: NON

Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: VALLEY WOMEN'S CENTER
Legal Name: VALLEY WOMEN'S CENTER, INC.

Address: 22110 ROSCOE BOULEVARD, SUITE 204

City, State Zip: CANOGA PARK, CA 91304

Phone: (818) 713-8700 Fax: (818) 713-8585

Record ID: 190502AN Service Type: NON

Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: HELPING KIDS TO RECOVER, INC. Legal Name: HELPING KIDS TO RECOVER, INC.

Address: 637 EAST ALBERTONI STREET, SUITES 200, 201 AND 203

City, State Zip: CARSON, CA 90746

Phone: (310) 217-0616 Fax: (310) 217-0545

Record ID: 190503AN
Service Type: NON

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: NEW HOPE DRUG AND ALCOHOL TREATMENT PROGRAM, INC.

Legal Name: NEW HOPE DRUG ALCOHOL TREATMENT PROGRAM, INC.

Address: 1841 AND 1841 1/2 WEST IMPERIAL HIGHWAY

City, State Zip: LOS ANGELES, CA 90047

Phone: (323) 750-2850 Fax: (323) 750-0851

Record ID: 190504AN
Service Type: NON

Service Type: NON Target Population: 1.1

Expiration Date: 2/29/2020 IMS: No

Program Name: COASTAL RECOVERY CENTER

Legal Name: TRANSCULTURAL HEALTH DEVELOPMENT, INC. Address: 117 EAST HARRY BRIDGES BOULEVARD

City, State Zip: WILMINGTON, CA 90744

Phone: (310) 549-8383 Fax: (310) 549-9304

Record ID: 190511BP
Service Type: NON-DETOX
Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: PASSAGES EAST

Legal Name: FEDERAL RECOVERY SYSTEMS LLC
Address: 6439 (B) SYCAMORE MEADOWS DRIVE

City, State Zip: MALIBU, CA 90265

Phone: (310) 589-2880 Fax: (310) 464-6592

Record ID: 190516AP
Service Type: RES-DETOX

Resident Capacity: 5
Total Occupancy: 5
Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: PASSAGES NORTHEAST

Legal Name: FEDERAL RECOVERY SYSTEMS LLC

Address: 6428 - B MEADOWS COURT

City, State Zip: MALIBU, CA 90265

Phone: (310) 589-2880 Fax: (310) 464-6592

Record ID: 190516BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: EATON CANYON TREATMENT CENTER

Legal Name: EATON CANYON RECOVERY SERVICES, INC.

Address: 3323 EAST FAIRPOINT STREET

City, State Zip: PASADENA, CA 91107

Phone: (626) 798-0150 Fax: (626) 798-8685

Record ID: 190521AP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 9
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: EATON CANYON TREATMENT CENTER OUT PATIENT SERVICES

No

Legal Name: EATON CANYON RECOVERY SERVICES, INC.

Address: 259 NORTH SIERRA MADRE VILLA

City, State Zip: PASADENA, CA 91107

Phone: (626) 798-0150 Fax: (626) 798-8685

Record ID: 190521BP
Service Type: NON
Target Population: 1.1

Expiration Date: 2/28/2019 IMS:

Program Name: EATON CANYON TREATMENT CENTER - WEST
Legal Name: EATON CANYON RECOVERY SERVICES, INC.

Address: 743 NORTH HILL AVENUE City, State Zip: PASADENA, CA 91104

Phone: (626) 798-0150 Fax: (626) 798-8685

Record ID: 190521CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: KB RECOVERY
Legal Name: KEVIN BABAYAN

Address: 15722 TUPPER STREET
City, State Zip: NORTH HILLS, CA 91343

Phone: (818) 231-8054 Fax: (818) 892-9471

Record ID: 190527AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

WEINGART CENTER ASSOCIATION/EPIC Program Name:

Legal Name: WEINGART CENTER ASSOCIATION

554 AND 566 SOUTH SAN PEDRO STREET, Address:

4TH, 7TH AND 8TH FLOOR

City, State Zip: LOS ANGELES, CA 90013

Phone: (213) 617-9000 Fax: (213) 623-0408

Record ID: 190541AN Service Type: RES Resident Capacity: 85

Total Occupancy: 85 Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: CHARTER OAK RECOVERY CENTER

Legal Name: AURORA CHARTER OAK - LOS ANGELES, LLC

Address: 1161 EAST COVINA BOULEVARD,

BUILDING C

COVINA, CA 91724 City, State Zip: Phone: (626) 966-1632

Record ID: 190551AP Service Type: RES Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

Expiration Date: 11/30/2018 TMS: No

Program Name: MALIBU BEACH RECOVERY CENTER MALIBU BEACH RECOVERY CENTER, LLC

Legal Name:

Address: 1752 CORRAL CANYON ROAD

City, State Zip: MALIBU, CA 90265 Phone: (310) 317-9133

Record ID: 190562AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

MALIBU BEACH RECOVERY CENTER - IOP Program Name: Legal Name: MALIBU BEACH RECOVERY CENTER, LLC Address: 15415 W. SUNSET BOULEVARD, SUITE 200

City, State Zip: PACIFIC PALISADES, CA 90272

(310) 456-2026 Phone:

Record ID: 190562BP NON Service Type: Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

MALIBU BEACH RECOVERY CENTER - BRENTWOOD HOUSE Program Name:

Legal Name: MALIBU BEACH RECOVERY CENTER, LLC

Address: 101 SOUTH SALTAIR AVENUE City, State Zip: LOS ANGELES, CA 90049

Phone: (310) 472-0139

Record ID: 190562CP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 9/30/2018

Program Name: MALIBU BEACH RECOVERY CENTER

Legal Name: MALIBU BEACH RECOVERY CENTER, LLC

Address: 4322 ESCONDIDO DRIVE City, State Zip: MALIBU, CA 90265 Phone: (424) 235-2346

Record ID: 190562EP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 6/30/2019 IMS: Nο Program Name: ALCOHOL AND SUBSTANCE ABUSE PROGRAMS, INC.
Legal Name: ALCOHOL AND SUBSTANCE ABUSE PROGRAMS, INC.

Address: 1084 & 1092 NEW YORK DRIVE

City, State Zip: ALTADENA, CA 91001

Phone: (818) 421-7890 Fax: (626) 798-2777

Record ID: 190569AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: SUNSET MALIBU
Legal Name: SUNSET MALIBU

Address: 30042 ANDROMEDA LANE City, State Zip: MALIBU, CA 90265

Phone: (310) 457-9500 Fax: (310) 457-9544

Record ID: 190575BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: AUTHENTIC RECOVERY CENTER

Legal Name: AUTHENTIC RECOVERY, LLC
Address: 2203 OVERLAND AVENUE
City, State Zip: LOS ANGELES, CA 90064

Phone: (310) 474-2100 Fax: (310) 481-2272

Record ID: 190577AP

Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name:AUTHENTIC RECOVERY CENTERLegal Name:AUTHENTIC RECOVERY, LLCAddress:2207 PELHAM AVENUE

City, State Zip: LOS ANGELES, CA 90064

Phone: (310) 401-4692 Fax: (310) 481-2264

Record ID: 190577BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: AUTHENTIC RECOVERY CENTER
Legal Name: AUTHENTIC RECOVERY, LLC

Address: 10780 SANTA MONICA BOULEVARD, SUITE 230 & 260

City, State Zip: LOS ANGELES , CA 90025

Phone: (310) 474-2100 Fax: (310) 481-2264

Record ID: 190577CP

Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: AUTHENTIC RECOVERY CENTER
Legal Name: AUTHENTIC RECOVERY, LLC
Address: 10700 CUSHDON AVE.
City, State Zip: LOS ANGELES, CA 90064

Phone: (310) 474-2100 Fax: (310) 481-2264

Record ID: 190577DP Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.8

Expiration Date: 2/28/2019 IMS: Yes

Program Name: HARBOR AREA SUBSTANCE ABUSE TREATMENT CENTER

Legal Name: HACC INC.

Address: 599 WEST 9TH STREET City, State Zip: SAN PEDRO, CA 90731

Phone: (310) 831-0331 Fax: (310) 831-0004

Record ID: 190586AP
Service Type: NON
Target Population: 1.5

Expiration Date: 11/30/2017 IMS: No

Program Name: DIVINE HEALTHCARE SERVICES, INC.
Legal Name: DIVINE HEALTHCARE SERVICES, INC.

Address: 405 WEST MANCHESTER BOULEVARD, SUITE A

City, State Zip: INGLEWOOD, CA 90301 Phone: (310) 672-3820

Record ID: 190604AN
Service Type: NON
Target Population: 1.5

Expiration Date: 5/31/2018 IMS: No

Program Name: YOUR EMPOWERING SOLUTIONS
Legal Name: YOUR EMPOWERING SOLUTIONS

Address: 4020 PALOS VERDES DRIVE NORTH, SUITE 201

City, State Zip: ROLLING HILLS ESTATE, CA 90274

Phone: (310) 541-6350 Fax: (310) 541-6497

Record ID: 190605AP
Service Type: NON
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: CIVIGENICS, INC., LONG BEACH FACILITY

Legal Name: COMMUNITY EDUCATION CENTERS, INC., DBA CALIFORNIA AS CEC INTL., INC.

Address: 2233 EAST 69TH STREET City, State Zip: LONG BEACH, CA 90805

Phone: (562) 663-0711 Fax: (562) 663-1343

Record ID: 190606AP

Service Type: RES
Resident Capacity: 112
Total Occupancy: 112
Target Population: 1.2

Expiration Date: 5/31/2018 IMS: No

Program Name: SUMMIT MALIBU

Legal Name: MALIBU LIGHTHOUSE TREATMENT CENTER, LLC

Address: 28011 PAQUET PLACE City, State Zip: MALIBU, CA 90265

Phone: (310) 457-0787 Fax: (310) 457-8067

Record ID: 190612BP
Service Type: RES-DETOX

Resident Capacity: 7
Total Occupancy: 7
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: SUMMIT MALIBU LOWER

Legal Name: MALIBU LIGHTHOUSE TREATMENT CENTER, LLC

Address: 27026 SEA VISTA DRIVE

City, State Zip: MALIBU, CA 90265

Phone: (310) 457-0787 Fax: (310) 457-8067

Record ID: 190612CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: PROMISES TREATMENT CENTERS IV

Legal Name: PROMAL4, INC.

Address: 20729 ROCKCROFT DRIVE City, State Zip: MALIBU, CA 90265

Phone: (310) 317-9233 Fax: (310) 317-9233

Record ID: 190617AP RES-DETOX Service Type:

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 12/31/2018 IMS:

Program Name: DIXON RECOVERY INSTITUTE, INC. Legal Name: DIXON RECOVERY INSTITUTE, INC.

Address: 1512 W. SLAUSON AVENUE, ROOMS 103, 202 & 210

City, State Zip: LOS ANGELES, CA 90047

Phone: (323) 244-5677 Fax: (866) 582-9013

Record ID: 190622AN Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2018 IMS:

PROMISES TREATMENT CENTERS III Program Name:

Legal Name: SBAR2 INC.

Address: 3743 SOUTH BARRINGTON AVENUE

City, State Zip: LOS ANGELES, CA 90066

Phone: (310) 390-2340

Record ID: 190623AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

12/31/2018 TMS: Expiration Date: No

Program Name: PROMISES TREATMENT CENTERS II

Legal Name: PROMAL2 INC.

Address: 20723 ROCKCROFT DRIVE City, State Zip: MALIBU, CA 90265

Phone: (310) 317-9233 (310) 943-0438 Fax:

Record ID: 190624AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

IMS: Expiration Date: 12/31/2018 Nο

PROMISES RESIDENTIAL TREATMENT CENTERS Program Name: Legal Name:

WESTSIDE SOBER LIVING CENTERS, INC.

Address: 20725 ROCKCROFT DRIVE

City, State Zip: MALIBU, CA 90265

(310) 390-2340 (310) 943-0438 Phone: Fax:

Record ID: 190625AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

12/31/2018 IMS: Expiration Date:

Program Name: PROMISES RESIDENTIAL TREATMENT CENTERS

Legal Name: WESTSIDE SOBER LIVING CENTERS, INC. Address: 3743 1/2 SOUTH BARRINGTON AVENUE

City, State Zip: LOS ANGELES, CA 90066

Fax: (310) 391-6436 Phone: (310) 390-2340

Record ID: 190625CP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: IMS: 12/31/2018

Program Name: PROMISES TREATMENT CENTERS VI

Legal Name: WESTSIDE SOBER LIVING CENTERS, INC.

20713 ROCKCROFT DRIVE Address: City, State Zip: MALIBU, CA 90265

(310) 317-9287 Phone: (310) 317-9233 Fax:

Record ID: 190625EP RES-DETOX Service Type:

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: PROMISES TREATMENT CENTERS - OUTPATIENT PROGRAM

Legal Name: WESTSIDE SOBER LIVING CENTERS, INC. Address: 2045 S. BARRINGTON AVENUE SUITE B

City, State Zip: LOS ANGELES, CA 90025

Phone: (310) 268-7737 (310) 479-3520 Fax:

Record ID: 190625FP Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2019 IMS:

PROFESSIONALS TREATMENT AT PROMISES Program Name: Legal Name: WESTSIDE SOBER LIVING CENTERS, INC.

Address: 2515 WILSHIRE BOULEVARD City, State Zip: SANTA MONICA, CA 90403

Phone: (424) 744-5155 Fax: (310) 943-3389

Record ID: 190625GP

Service Type: NON

Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

RIDGEVIEW RANCH Program Name:

Legal Name: RIDGEVIEW DRIVE RANCH, LLC

Address: 3085 RIDGEVIEW DRIVE City, State Zip: ALTADENA, CA 91001

(626) 482-3478 (626) 791-1592 Phone: Fax:

Record ID: 190627AP

RES Service Type: Resident Capacity: 10 Total Occupancy: 10 Target Population: 1.1

2/28/2018 Expiration Date: IMS: No

Program Name: RIDGEVIEW RANCH II

Legal Name: RIDGEVIEW DRIVE RANCH, LLC

Address: 3323 MARENGO AVENUE City, State Zip: ALTADENA, CA 91001

Phone: (626) 765-9600 Fax: (626) 765-9605

Record ID: 190627BP RES-DETOX Service Type:

Resident Capacity: Total Occupancy: 10 Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: RIDGEVIEW RANCH III

Legal Name: RIDGEVIEW DRIVE RANCH, LLC

915 GREEN LANE Address:

City, State Zip: LA CANADA FLINTRIDGE, CA 91011

(626) 254-7881 Phone:

Record ID: 190627FP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 10 Target Population: 1.1

Expiration Date: 6/30/2019 IMS: Yes Program Name:MEDI-CURE HEALTH SERVICES, INC.Legal Name:MEDI-CURE HEALTH SERVICES, INC.Address:3756 SANTA ROSALIA DRIVE # 417

City, State Zip: LOS ANGELES, CA 90008

(323) 295-1136 Fax: (323) 295-1071

Record ID: 190636AN
Service Type: NON
Target Population: 1.5

Phone:

Expiration Date: 10/31/2018 IMS: No

Program Name: DAVID & MARGARET YOUTH AND FAMILY SERVICES RECOVERY PROGRAM

Legal Name: DAVID AND MARGARET HOME, INC.

Address: 1350 THIRD STREET City, State Zip: LA VERNE, CA 91750

Phone: (909) 596-5921 Ext:3500 Fax: (909) 596-3954

Record ID: 190641AN
Service Type: DSS
Target Population: 1.5

Expiration Date: 5/31/2019 IMS: No

Program Name: MILESTONES 1, THE RANCH MALIBU VENTURE 1

Legal Name: THE RANCH MALIBU VENTURE 1
Address: 200 VERA CANYON ROAD

City, State Zip: MALIBU, CA 90265

Phone: (818) 879-9110 Fax: (818) 879-9011

Record ID: 190649AP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: MILESTONES 2, THE RANCH MALIBU VENTURE 1

Legal Name: THE RANCH MALIBU VENTURE 1
Address: 221 VERA CANYON ROAD
City, State Zip: MALIBU, CA 90265

Phone: (818) 879-9110 Fax: (818) 879-9011

Record ID: 190649BP
Service Type: RES

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: PASSAGES 8

Legal Name: 6390 MEADOWS COURT LLC
Address: 6390 MEADOWS COURT
City, State Zip: MALIBU, CA 90265

Phone: (310) 589-2880 Fax: (310) 464-0663

Record ID: 190650AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: PASSAGES 9

Legal Name: 6390A MEADOWS COURT LLC
Address: 6390-B MEADOWS COURT
(REAR GUEST HOUSE)

City, State Zip: MALIBU, CA 90265

Phone: (310) 589-2880 Fax: (310) 464-0663

Record ID: 190652AP
Service Type: RES-DETOX

Resident Capacity: 5 Total Occupancy: 5 Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: 2ND CHANCE FOR RECOVERY

Legal Name: 2ND CHANCE FOR RECOVERY, INC.
Address: 600 E 7TH STREET, SUITE 104 & 105

City, State Zip: LOS ANGELES, CA 90021

Phone: (213) 537-0110 Fax: (213) 537-0880

Record ID: 190653AN
Service Type: NON
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: SERENITY MALIBU

Legal Name: SEASONS RECOVERY CENTERS LLC

Address: 6021 GALAHAD ROAD City, State Zip: MALIBU, CA 90265

Phone: (424) 234-2044 Fax: (818) 337-0365

Record ID: 190655AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: SEASONS AGOURA

Legal Name: SEASONS RECOVERY CENTERS LLC

Address: 5850 LAPWORTH DRIVE City, State Zip: AGOURA HILLS, CA 91301

Phone: (747) 222-7802 Fax: (424) 235-2017

Record ID: 190655CP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: YOU CAN ALCOHOL AND DRUG COUNSELING AND EDUCATION PROGRAM

Legal Name: YOU CAN HEALTH SERVICES

Address: 600 WEST MANCHESTER AVENUE, SUITE 5

City, State Zip: LOS ANGELES, CA 90044

Phone: (310) 349-9778

Record ID: 190656AN
Service Type: NON
Target Population: 1.5

Expiration Date: 9/30/2018 IMS: No

Program Name: CLIFFSIDE MALIBU II
Legal Name: CLIFFSIDE MALIBU II
Address: 5853 BUSCH DRIVE
City, State Zip: MALIBU, CA 90265

Phone: (800) 332-9202 Fax: (424) 781-4708

Record ID: 190658AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: SOBA TREATMENT CENTER

Legal Name: SOBALIVING LLC.

Address: 22677 PACIFIC COAST HIGHWAY

City, State Zip: MALIBU, CA 90265 Phone: (310) 457-5250

Record ID: 190664AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: SOBA RECOVERY CENTER Legal Name: SOBALIVING LLC.

Legal Name: SOBALIVING LLC.
Address: 27437 WINDING WAY
City, State Zip: MALIBU, CA 90265

Phone: (310) 589-2180 Fax: (310) 919-3667

Record ID: 190664BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: HANNAH'S FIRST STEP TREATMENT CENTER

Legal Name: HANNA'S HOUSE

Address: 5900 SOUTH EASTERN AVENUE, SUITE 186

City, State Zip: COMMERCE, CA 90040

Phone: (323) 278-6501 Fax: (323) 278-6515

Record ID: 190678AN
Service Type: NON
Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: OCEANSIDE MALIBU

Legal Name: OCEANSIDE TRANSITIONAL LIVING IN MALIBU, INC.

Address: 21022 PACIFIC COAST HIGHWAY

City, State Zip: MALIBU, CA 90265

Phone: (818) 917-3225 Fax: (310) 456-3305

Record ID: 190687AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: OCEANSIDE TRANSITIONAL LIVING IN MALIBU, INC. Legal Name: OCEANSIDE TRANSITIONAL LIVING IN MALIBU, INC.

Address: 23480 PARK SORRENTO,

217A

City, State Zip: CALABASAS, CA 91302

Phone: (818) 917-3225 Fax: (888) 999-9477

Record ID: 190687BP
Service Type: NON

Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: KLEAN WEST HOLLYWOOD
Legal Name: KLEAN W. HOLLYWOOD, LLC

Address: 840, 842, 844, 846, 848, 850, 852, 852 1/2, 854 HILLDALE AVENUE

City, State Zip: WEST HOLLYWOOD, CA 90069

Phone: (310) 895-7095 Fax: (310) 358-9374

Record ID: 190692AP
Service Type: RES-DETOX
Resident Capacity: 26
Total Occupancy: 26
Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: KLEAN W. HOLLYWOOD OUTPATIENT

Legal Name: KLEAN W. HOLLYWOOD, LLC

Address: 9000 SUNSET BOULEVARD, SUITE 650-B

City, State Zip: WEST HOLLYWOOD, CA 90069

Phone: (310) 922-2264

Record ID: 190692HP
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: SEASONS IN MALIBU

Legal Name: SEASONS RECOVERY CENTERS LLC Address: 32223 PACIFIC COAST HIGHWAY

City, State Zip: MALIBU , CA 90265

Phone: (424) 457-8396 Fax: (424) 235-2017

Record ID: 190695AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: THE HILLS TREATMENT CENTER, LLC
Legal Name: THE HILLS TREATMENT CENTER, LLC

Address: 8147, 8171 AND 8207 MULHOLLAND DRIVE, AND

8507 WILLOW GLEN ROAD

City, State Zip: LOS ANGELES, CA 90046

Phone: (323) 791-5489 Fax: (877) 729-8207

Record ID: 190703AP
Service Type: RES-DETOX

Resident Capacity: 21 Total Occupancy: 21 Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: CHAPMAN HOUSE
Legal Name: CHAPMAN HOUSE, INC.
Address: 834 PACIFIC AVENUE
City, State Zip: LONG BEACH, CA 90813

Phone: (714) 742-2909 Fax: (714) 288-6130

Record ID: 190706AP

Service Type: RES Resident Capacity: 37 Total Occupancy: 37 Target Population: 1.3

Expiration Date: 6/30/2018 IMS: No

Program Name: PACIFICA RECOVERY, INC. Legal Name: PACIFICA RECOVERY, INC.

Address: 415 WEST FOOTHILL BOULEVARD, SUITES 210 AND 211

City, State Zip: CLAREMONT, CA 91711

Phone: (919) 447-5081 Fax: (919) 447-5974

Record ID: 190712AP
Service Type: NON

Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: MELA COUNSELING SERVICES CENTER, INC. Legal Name: MELA COUNSELING SERVICES CENTER, INC.

Address: 5723 WHITTIER BOULEVARD City, State Zip: LOS ANGELES, CA 90022-4222

Phone: (323) 721-6855 Fax: (323) 721-8631

Record ID: 190713AN

Service Type: NON Target Population: 1.10

Expiration Date: 3/31/2019 IMS: No

Program Name: MINI HOUSE RESIDENTIAL TREATMENT

Legal Name: JWCH INSTITUTE, INC.
Address: 303 EAST 52ND STREET
City, State Zip: LOS ANGELES, CA 90011

Phone: (323) 813-0200 Fax: (323) 215-0170

Record ID: 190718AN

Service Type: RES
Resident Capacity: 31
Total Occupancy: 31
Target Population: 1.4

Expiration Date: 4/30/2019 IMS: No

Program Name: SOLUTION FAMILY RESOURCE CENTER

Legal Name: JWCH INSTITUTE, INC.

Address: 1218 EAST COMPTON BOULEVARD

City, State Zip: COMPTON, CA 90221

Phone: (310) 608-1505 Fax: (323) 215-0170

Record ID: 190718BN

Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: CENTER FOR COMMUNITY HEALTH

Legal Name: JWCH INSTITUTE, INC.
Address: 522 S SAN PEDRO STREET
City, State Zip: LOS ANGELES, CA 90013

Phone: (213) 486-4050 Fax: (213) 627-4015

Record ID: 190718CN

Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: ALTERNATIVES RECOVERY

Legal Name: SPENCER RECOVERY CENTERS, INC.

Address: 2530 HYPERION AVENUE City, State Zip: LOS ANGELES, CA 90027

Phone: (949) 313-5223

Record ID: 190721AP
Service Type: NON
Target Population: 1.1

Expiration Date: 9/30/2017 IMS: No

Program Name: PROMINENCE TREATMENT CENTER

Legal Name: PROMINENCE CORPORATION
Address: 2150 COLD CANYON ROAD
City, State Zip: CALABASAS, CA 91302

Phone: (818) 591-6869 Fax: (818) 914-6279

Record ID: 190722AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 12
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: MALIBU CANYON REHABILITATION

Legal Name: PROMINENCE CORPORATION

Address: 4505 LAS VIRGENES ROAD, SUITE 205 & 207

City, State Zip: CALABASAS, CA 91302-1956

Phone: (818) 878-6900 Fax: (818) 878-6902

Record ID: 190722BP

Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: PROMINENCE TREATMENT CENTER

Legal Name: PROMINENCE CORPORATION
Address: 25053 MULHOLLAND HIGHWAY
City, State Zip: CALABASAS, CA 91302

City, State Zip: CALABASAS, CA 91302

Phone: (818) 225-8102 Fax: (818) 914-6840

Record ID: 190722CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: THE CONTROL CENTER

Legal Name: THE CONTROL CENTER, INC.

8383 WILSHIRE BOULEVARD, SUITE 228 Address:

City, State Zip: BEVERLY HILLS, CA 90211-2433

(310) 271-8700 Phone: Fax: (310) 271-8703

Record ID: 190723AP Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

LA FUENTE HOLLYWOOD TREATMENT CENTER LLC Program Name:

Legal Name: LA FUENTE HOLLYWOOD TREATMENT CENTER LLC

Address: 5718 & 5718 1/2 FOUNTAIN AVENUE

City, State Zip: LOS ANGELES, CA 90028

(323) 464-2947 Phone: Fax: (323) 544-6307

Record ID: 190725AP Service Type: RES-DETOX

Resident Capacity: 10 Total Occupancy: 10 Target Population: 1.10

Expiration Date: 9/30/2019 IMS: No

LA FUENTE HOLLYWOOD OUTPATIENT Program Name:

Legal Name: LA FUENTE HOLLYWOOD TREATMENT CENTER LLC

Address: 1601 NORTH GOWER STREET, SUITE 101

City, State Zip: LOS ANGELES, CA 90028

(323) 464-2947 Phone: Fax: (323) 544-6307

Record ID: 190725BP

Service Type: NON

Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

HEALTHRIGHT 360 Program Name: Legal Name: HEALTHRIGHT 360 Address: 12423 DAHLIA AVENUE EL MONTE, CA 91732 City, State Zip:

(626) 258-0325 Fax: (415) 865-0119 Phone:

Record ID: 190728AN

RES Service Type: Resident Capacity: 72 Total Occupancy: 102 Target Population: 1.4

8/31/2019 Expiration Date: IMS: No

Program Name: HEALTHRIGHT 360 Legal Name: HEALTHRIGHT 360 2307 WEST 6TH STREET Address: City, State Zip: LOS ANGELES, CA 90057

Phone: (415) 970-7500

Record ID: 190728BN Service Type: RES Resident Capacity: 200 Total Occupancy: 200 Target Population: 1.2

Expiration Date: 9/30/2018 IMS: No

Program Name: HEALTHRIGHT 360 Legal Name: HEALTHRIGHT 360 Address: 145 WEST 22ND STREET City, State Zip: LOS ANGELES, CA 90007

(415) 970-7500 Phone:

Record ID: 190728CN Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No Program Name: PROTOTYPES OUTPATIENT BEHAVIORAL HEALTH SERVICES CENTER

Legal Name: HEALTHRIGHT 360

Address: 2555 E. COLORADO BLVD. SUITE 100-101

City, State Zip: PASADENA, CA 91107

(626) 577-2261 Phone: Fax: (626) 577-2305

Record ID: 190728DN Service Type: NON Target Population: 1.8

Expiration Date: 2/28/2018 IMS: No

PROTOTYPES OUTPATIENT BEHAVIORAL HEALTH SERVICES CENTER, POMONA Program Name:

Legal Name: HEALTHRIGHT 360 Address: 831 E. ARROW HIGHWAY City, State Zip: POMONA, CA 91767 Phone: (909) 398-4383 190728EN

Record ID: Service Type: NON Target Population: 1.8

Expiration Date: 1/31/2018 IMS: Nο

Program Name: PROTOTYPES RESOLVE RECOVERY

Legal Name: HEALTHRIGHT 360 Address: 6109 AFTON PLACE City, State Zip: LOS ANGELES, CA 90028

Phone: (323) 461-4118 Fax: (323) 461-4119

Record ID: 190728FN Service Type: RES-DETOX 34 Resident Capacity:

Total Occupancy: 34 Target Population: 1.4

Expiration Date: 2/28/2019 IMS: No

PROTOTYPES WOMEN'S CENTER Program Name:

Legal Name: HEALTHRIGHT 360 Address: 845 E. ARROW HIGHWAY City, State Zip: POMONA, CA 91767 (909) 624-1233 Phone:

Record ID: 190728GN RES-DETOX Service Type: Resident Capacity: 164

Total Occupancy: 254 Target Population: 1.4

7/31/2018 Expiration Date: IMS: No

Program Name: INSPIRE MALIBU

Legal Name: MALIBU CALIFORNIA MODEL DRUG TREATMENT CENTER, INC.

Address: 30101 AGOURA COURT

SUITE 103

AGOURA HILLS, CA 91301 City, State Zip:

Phone: (818) 532-6243 Fax: (818) 532-6244

Record ID: 190729AP Service Type: NON-DETOX Target Population: 1.8

Expiration Date: IMS: 10/31/2017 No

INSPIRE MALIBU Program Name:

Legal Name: MALIBU CALIFORNIA MODEL DRUG TREATMENT CENTER, INC.

Address: 3875 KANAN ROAD

City, State Zip: AGOURA HILLS, CA 91301

Phone: (818) 359-3666 Fax: (818) 532-6244

Record ID: 190729BP Service Type: RES-DETOX

Resident Capacity: 11 Total Occupancy: 11 Target Population: 1.1

4/30/2018 IMS: Expiration Date: No Program Name: INSPIRE MALIBU

Legal Name: MALIBU CALIFORNIA MODEL DRUG TREATMENT CENTER, INC.

Address: 33239 MULHOLLAND HIGHWAY

City, State Zip: MALIBU, CA 90265

Phone: (818) 359-3666 Ext:824 Fax: (818) 532-6244

Record ID: 190729DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: FFC SUBSTANCE ABUSE DISORDER TREATMENT PROGRAM

Legal Name: FAMILIES FOR CHILDREN INC.
Address: 2504 W. MANCHESTER BOULEVARD

City, State Zip: INGLEWOOD, CA 90305

Phone: (323) 750-5855 Fax: (310) 750-5885

Record ID: 190730AN
Service Type: NON
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: PAX HOUSE
Legal Name: PAX HOUSE, INC.
Address: 324 WAPELLO STREET
City, State Zip: ALTADENA, CA 91001
Phone: (626) 398-3897

Record ID: 190732AP
Service Type: RES-DETOX

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: PAX HOUSE

Legal Name: PAX HOUSE, INC.

Address: 2052 N. LAKE AVENUE, SUITE F

City, State Zip: ALTADENA, CA 91001

Phone: (323) 821-6226 Fax: (626) 243-4425

Record ID: 190732BP Service Type: NON

Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name:CYCLES OF CHANGE RECOVERY SERVICESLegal Name:DESIGN FOR LIVING BEHAVIOR HEALTH, INC.

Address: 43858 BEECH AVENUE City, State Zip: LANCASTER, CA 93534

Phone: (661) 729-8155 Fax: (661) 949-8131

Record ID: 190735AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: CYCLES OF CHANGE II

Legal Name: DESIGN FOR LIVING BEHAVIOR HEALTH, INC.

Address: 36451 EL CAMINO DRIVE City, State Zip: PALMDALE, CA 93551

Phone: (818) 489-3779 Fax: (661) 800-4827

Record ID: 190735BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: CYCLES OF CHANGE RECOVERY SERVICES
Legal Name: DESIGN FOR LIVING BEHAVIOR HEALTH, INC.

Address: 1805 WEST AVENUE K, SUITE 202

City, State Zip: LANCASTER, CA 93534

Phone: (661) 948-8390 Fax: (661) 948-8184

Record ID: 190735CP
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: CYCLES OF CHANGE III

Legal Name: DESIGN FOR LIVING BEHAVIOR HEALTH, INC.

Address: 44210 61ST STREET WEST City, State Zip: LANCASTER, CA 93536 Phone: (661) 846-2662

Record ID: 190735DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: ADVANCES IN MENTAL HEALTH AND ADDICTIONS TREATMENT, INC. Legal Name: ADVANCES IN MENTAL HEALTH AND ADDICTIONS TREATMENT, INC.

Address: 5199 E. PACIFIC COAST HIGHWAY, SUITE 330N

City, State Zip: LONG BEACH, CA 90804

Phone: (562) 365-2020 Fax: (562) 239-3135

Record ID: 190736AP
Service Type: NON

Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: SCHARP - OASIS HOUSE

Legal Name: SOUTHERN CALIFORNIA HEALTH & REHABILITATION PROGRAM

Address: 5201 S. VERMONT AVENUE City, State Zip: LOS ANGELES, CA 90037

Phone: (323) 751-2677 Fax: (323) 751-0971

Record ID: 190745AN

Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: THE CANYON AT SANTA MONICA
Legal Name: THE CANYON AT SANTA MONICA, LLC

Address: 12304 SANTA MONICA BOULEVARD, SUITE #112

City, State Zip: LOS ANGELES, CA 90025

Phone: (424) 832-7368

Record ID: 190746AP
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: H & H TESTING OUTPATIENT
Legal Name: H & H TESTING, INC.

Address: 10801 NATIONAL BOULEVARD,

Address: 10801 NATIONAL BOULEVARD,
SUITE 251, 420 AND 579

City, State Zip: LOS ANGELES, CA 90064

Phone: (424) 293-2224 Fax: (424) 293-2264

Record ID: 190750AP

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

MOTIVATIONAL RECOVERY SERVICES, INC. Program Name: Legal Name: MOTIVATIONAL RECOVERY SERVICES, INC.

2116 S. CENTRAL AVENUE Address:

#2118

LOS ANGELES, CA 90011 City, State Zip:

Phone: (213) 493-4664 Fax: (213) 493-4665

Record ID: 190751AN Service Type: NON Target Population: 1.1

7/31/2018 IMS: Expiration Date: No

AVALON MALIBU Program Name:

Legal Name: AVALON BY THE SEA, INC.

WHICH WILL DO BUSINESS IN CALIFORNIA AS MALIBU INTEGRATA

Address: 32430 PACIFIC COAST HIGHWAY

City, State Zip: MALIBU, CA 90265

Phone: (310) 457-9111 (310) 457-3013 Fax:

Record ID: 190752AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 9/30/2018 TMS: No

Program Name: MALIBU INTEGRATIVE RECOVERY

AVALON BY THE SEA, INC. Legal Name:

WHICH WILL DO BUSINESS IN CALIFORNIA AS MALIBU INTEGRATA

29350 PACIFIC COAST HIGHWAY, #9 AND 11 Address:

City, State Zip: MALIBU, CA 90265

Phone: (424) 235-2229 Fax: (424) 235-2230

Record ID: 190752CP Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

HOPE ALIVE COUNSELING CENTERS, LLC Program Name:

HOPE ALIVE COUNSELING CENTERS, LLC Legal Name:

Address: 4242 LAVINIA AVENUE City, State Zip: LYNWOOD, CA 90262 Phone: (310) 710-2280

Record ID: 190753AP Service Type: RES Resident Capacity: 6 Total Occupancy: 6

Target Population: 1.1

Expiration Date: 8/31/2018 TMS: Nο

Program Name: HOPE ALIVE COUNSELING CENTERS, LLC HOPE ALIVE COUNSELING CENTERS, LLC Legal Name:

Address: 11157 ATLANTIC AVENUE LYNWOOD, CA 90262 City, State Zip: Phone: (310) 710-2280

Record ID: 190753BP Service Type: NON

Target Population: 1.1

Expiration Date: 8/31/2018 TMS: No

Program Name: TURNING POINT ALCOHOL AND DRUG EDUCATION PROGRAM

Legal Name: TURNING POINT ALCOHOL AND DRUG EDUCATION PROGRAM, INC.

Address: 3756 SANTA ROSALIA DRIVE, SUITE 617

LOS ANGELES, CA 90008 City, State Zip:

Phone: (323) 810-3153

Record ID: 190758AN Service Type: NON

Target Population: 1.1 8/31/2018 Expiration Date: IMS: No Program Name: REBOS

Legal Name: LIVING REBOS, LLC

Address: 1772 S ROBERTSON BOULEVARD City, State Zip: LOS ANGELES, CA 90035

Phone: (310) 694-5590 Fax: (310) 694-3278

Record ID: 190759AP
Service Type: NON
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: VISIONS TREATMENT CENTERS, LLC
Legal Name: VISIONS TREATMENT CENTERS, LLC

Address: 119 BARRINGTON PLACE AND 115 BARRINGTON WALK

City, State Zip: LOS ANGELES, CA 90049

Phone: (310) 476-0033 Fax: (310) 694-3278

Record ID: 190760AP
Service Type: NON
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: SOVEREIGN HEALTH OF CALIFORNIA

Legal Name: DUAL DIAGNOSIS TREATMENT CENTER, INC.

Address: 6167 BRISTOL PARKWAY,

SUITE 100

City, State Zip: CULVER CITY, CA 90230

Phone: (424) 207-2220 Fax: (949) 276-5183

Record ID: 190762AP

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: SOVEREIGN HEALTH OF LOS ANGELES I

Legal Name: DUAL DIAGNOSIS TREATMENT CENTER, INC.

Address: 12832 SHORT AVENUE City, State Zip: LOS ANGELES, CA 90066

Phone: (949) 923-7895

Record ID: 190762BP

Service Type: RES-DETOX
Resident Capacity: 6

Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: ARTEMIS HILL RECOVERY
Legal Name: ARTEMIS HILL RECOVERY INC.

Address: 1858 LEES AVENUE
City, State Zip: LONG BEACH, CA 90815

Phone: (562) 754-6068 Fax: (714) 536-5157

Record ID: 190763AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 11/30/2018 IMS: Yes

Program Name: THE DISCOVERY HOUSE RESIDENTIAL TREATMENT

Legal Name: THE DISCOVERY HOUSE, LLC Address: 6957 ENFIELD AVENUE AND

6956 BERTRAND AVENUE AND 6953 ENFIELD AVENUE

City, State Zip: RESEDA, CA 91335

Phone: (818) 654-4907 Fax: (818) 401-9387

Record ID: 190764AP
Service Type: RES-DETOX

Resident Capacity: 30
Total Occupancy: 30
Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: TDH FAMILY CONSULTING OUTPATIENT HEALTHCARE SERVICES

Legal Name: THE DISCOVERY HOUSE, LLC Address: 17635 VANOWEN STREET City, State Zip: VAN NUYS, CA 91406

Phone: (805) 991-2002 Fax: (818) 401-9387

Record ID: 190764DP
Service Type: NON
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: PROGRESSIONS TLC, LLC
Legal Name: PROGRESSIONS TLC, LLC
Address: 5336 WINNETKA AVENUE
City, State Zip: WOODLAND HILLS, CA 91364

Phone: (818) 324-2507 Fax: (888) 310-4278

Record ID: 190768AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: ELIJAH'S HOUSE TREATMENT CENTER

Legal Name: ELIJAH'S HOUSE TX CORP.
Address: 1617 ASBURY DRIVE
City, State Zip: PASADENA, CA 91104

Phone: (626) 394-9565 Fax: (626) 696-3242

Record ID: 190769AP
Service Type: RES-DETOX
Resident Capacity: 10

Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: HELPFUL HANDS DRUG AND ALCOHOL OUTPATIENT PROGRAM, INC.

Legal Name: HELPFUL HANDS DRUG AND ALCOHOL OUTPATIENT PROGRAM, INC.

Address: 1249 S. LA BREA AVENUE City, State Zip: LOS ANGELES, CA 90019

Phone: (323) 592-3722 Fax: (323) 931-4748

Record ID: 190770AN

Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name:THE BEACH HOUSE CENTERLegal Name:JAMES & BENTZ, INC.Address:31450 BROAD BEACH ROAD

City, State Zip: MALIBU, CA 90265

Phone: (424) 644-0707 Fax: (424) 644-0990

Record ID: 190773AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: THE BEACH HOUSE CENTER FOR WELLNESS

Legal Name: JAMES & BENTZ, INC.

Address: 22601 PACIFIC COAST HIGHWAY SUITE 235

City, State Zip: MALIBU, CA 90265

Phone: (310) 317-0228 Fax: (310) 317-0312

Record ID: 190773BP
Service Type: NON-DETOX

Target Population: 1.8

Expiration Date: 5/31/2019 IMS: No

Program Name: EXODUS RECOVERY INTEGRATED CLINIC

Legal Name: EXODUS RECOVERY, INC. Address: 1920 MARENGO STREET City, State Zip: LOS ANGELES, CA 90033

1.1

Phone: (310) 945-3350 Fax: (323) 276-6479

Record ID: 190774AP Service Type: NON

Target Population:

Expiration Date: 7/31/2019 IMS: No

Program Name: HARMONY DETOX CENTER
Legal Name: HARMONY HOLLYWOOD LLC
Address: 826 NORTH MARIPOSA AVENUE
City, State Zip: LOS ANGELES, CA 90029

Phone: (323) 375-5356 Fax: (323) 454-4598

Record ID: 190775BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: HOLLYWOOD DETOX CENTER
Legal Name: HARMONY HOLLYWOOD LLC

Address: 830 & 832 NORTH MARIPOSA AVENUE

City, State Zip: LOS ANGELES, CA 90029

Phone: (323) 375-5356 Fax: (323) 454-4598

Record ID: 190775CP
Service Type: RES-DETOX
Resident Capacity: 12
Total Occupancy: 12

Total Occupancy: 12
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: 1736 FAMILY CRISIS CENTER Legal Name: 1736 FAMILY CRISIS CENTER

Address: 21707 HAWTHORNE BOULEVARD, SUITE 300

City, State Zip: TORRANCE, CA 90503
Phone: (310) 543-9900
Record ID: 190777AN

Service Type: NON
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name:1736 FAMILY CRISIS CENTERLegal Name:1736 FAMILY CRISIS CENTER

Address: 2116 ARLINGTON AVENUE, SUITE 200

City, State Zip: LOS ANGELES, CA 90018

Phone: (310) 543-9900 Record ID: 190777BN

Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: KOOL LIVING RECOVERY CENTER

Legal Name: KOOL LIVING, INC.
Address: 20138 ELKWOOD STREET
City, State Zip: WINNETKA, CA 91306-2312

Phone: (818) 626-8704 Fax: (707) 202-0622

Record ID: 190778AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: KOOL LIVING, INC. Legal Name: KOOL LIVING, INC.

Address: 226421 CROWN VALLEY PARKWAY, SUITE 200

City, State Zip: MISSION VIEGO, CA 95691

(951) 427-4807 (747) 202-0622 Phone: Fax:

Record ID: 190778BP Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: KOOL LIVING RECOVERY CENTER

Legal Name: KOOL LIVING, INC. Address: 18960 KESWICK STREET City, State Zip: RESEDA, CA 91335

Phone: (818) 862-9180 Fax: (747) 202-0622

Record ID: 190778CP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

KOOL LIVING RECOVERY CENTER Program Name:

Legal Name: KOOL LIVING, INC. Address: 7735 WINNETKA AVENUE City, State Zip: WINNETKA, CA 91306

(951) 427-4807 Phone: Fax: (747) 202-0622

Record ID: 190778DP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: CORNERSTONE OUTPATIENT TREATMENT PROGRAM

Legal Name: SAN FERNANDO VALLEY COMMUNITY MENTAL HEALTH CENTER, INCORPORATED

Address: 5950 CEDROS STREET VAN NUYS, CA 91411 City, State Zip:

Phone: (818) 901-4836 (818) 376-0044 Fax:

Record ID: 190780AN

Service Type: NON Target Population: 1.1

9/30/2017 IMS: Expiration Date: No

Program Name: COMPATIOR, INC. COMPATIOR, INC. Legal Name:

Address: 9637 CALIFORNIA AVENUE SOUTH GATE, CA 90280 City, State Zip: (323) 378-2009

Phone: Record ID: 190785AN

Service Type: NON Target Population: 1.1

5/31/2018 Expiration Date: IMS: No

Program Name: ACADIA MALIBU Legal Name: ACADIA MALIBU, INC. Address: 5922 PHILIP AVENUE MALIBU, CA 90265 City, State Zip:

Phone: (310) 457-4417 Fax: (310) 494-0442

Record ID: 190786AP

Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No Program Name: ALO HOUSE RECOVERY CENTERS

Legal Name: ACADIA MALIBU, INC.

Address: 28955 PACIFIC COAST HIGHWAY

#200

City, State Zip: MALIBU, CA 90265

Phone: (310) 975-5344 Fax: (310) 494-0442

Record ID: 190786CP
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: ACADIA MALIBU, INC.
Legal Name: ACADIA MALIBU, INC.
Address: 28901 SELFRIDGE DRIVE
City, State Zip: MALIBU, CA 90265

Phone: (310) 975-5344 Fax: (310) 494-0442

Record ID: 190786DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: ALO HOUSE RECOVERY CENTERS OUTPATIENT PROGRAM

Legal Name: ACADIA MALIBU, INC.
Address: 3042 ROWENA AVENUE
City, State Zip: LOS ANGELES, CA 90039

Phone: (310) 975-5344
Record ID: 190786EP

Record ID: 190° Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: ALO HOUSE RECOVERY CENTERS

Legal Name: ACADIA MALIBU, INC. Address: 5918 PHILIP AVENUE City, State Zip: MALIBU, CA 90265

Phone: (310) 579-6597 Fax: (310) 494-0442

Record ID: 190786FP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: BREATHE LIFE HEALING CENTER

Legal Name: BREATHE WEHO TREATMENT SERVICES LLC
Address: 8730 WEST SUNSET BOULEVARD, SUITE 500

City, State Zip: WEST HOLLYWOOD, CA 90069

Phone: (800) 929-5904 Fax: (800) 763-1597

Record ID: 190788AP
Service Type: NON

Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: BREATHE WEHO TREATMENT SERVICES
Legal Name: BREATHE WEHO TREATMENT SERVICES LLC

Address: 8020 JOVENITA CANYON DRIVE

City, State Zip: LOS ANGELES, CA 90046

Phone: (323) 997-4409 Fax: (310) 659-9088

Record ID: 190788BP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: VITA BEHAVIORAL HEALTH

Legal Name: VITA BEHAVIORAL HEALTH, INC.

Address: 14000 VALERIO STREET
City, State Zip: VAN NUYS, CA 91405
Phone: (747) 998-5627

Record ID: 190789AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: REHOBOTH DRUG AND ALCOHOL PREVENTION CENTER
Legal Name: REHOBOTH DRUG AND ALCOHOL PREVENTION CENTER

Address: 716 W. COMPTON BOULEVARD

City, State Zip: COMPTON, CA 90220 Phone: (310) 663-0789

Record ID: 190793AN
Service Type: NON
Target Population: 1.8

Expiration Date: 6/30/2018 IMS: No

Program Name: GROWTH EXTENDED, INC.
Legal Name: GROWTH EXTENDED, INC.
Address: 15743 COVELLO STREET
City, State Zip: LAKE BALBOA, CA 91406

Phone: (888) 447-1116 Ext:8 Fax: (888) 751-6166

Record ID: 190794AP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: DESIGN FOR CHANGE
Legal Name: DESIGN FOR CHANGE
Address: 1066 EAST AVENUE J &
44319 11TH STREET EAST

City, State Zip: LANCASTER, CA 93535

Phone: (661) 942-1026 Fax: (661) 349-4737

Record ID: 190795AP
Service Type: RES-DETOX

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: DESIGN FOR CHANGE OUTPATIENT

Legal Name: DESIGN FOR CHANGE

Address: 44501 16TH STREET WEST,

SUITE 101

City, State Zip: LANCASTER, CA 93534

Phone: (661) 945-2317 Fax: (661) 945-5750

Record ID: 190795BP

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name:DESIGN FOR CHANGE IILegal Name:DESIGN FOR CHANGEAddress:40516 MILAN DRIVECity, State Zip:PALMDALE, CA 93551

Phone: (661) 947-9967 Fax: (661) 526-4383

Record ID: 190795CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: RENAISSANCE SOUTH LA, INC. Legal Name: RENAISSANCE SOUTH LA, INC.

Address: 19401 S. VERMONT AVENUE, SUITE B-102 & C-100

City, State Zip: TORRANCE, CA 90502

Phone: (310) 919-5500 Fax: (310) 756-6575

Record ID: 190796AN
Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: CAREFORWARD HEALTH

Legal Name: CAREFORWARD HEALTH, LLC

Address: 9730 WILSHIRE BOULEVARD, SUITE 109

City, State Zip: BEVERLY HILLS, CA 90212

Phone: (310) 463-5521 Fax: (424) 201-2696

Record ID: 190797AP
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: MUSE TREATMENT

Legal Name: A NEW START TREATMENT AND RECOVERY CENTER, LLC

Address: 1251 WESTWOOD BLVD.
City, State Zip: LOS ANGELES, CA 90024

Phone: (310) 287-1919 Fax: (310) 202-6410

Record ID: 190798AP

Service Type: NON Target Population: 1.1

Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: A NEW START TREATMENT AND RECOVERY CENTER, LLC Legal Name: A NEW START TREATMENT AND RECOVERY CENTER, LLC

Address: 11241, 11243 & 11245 LUCERNE AVENUE

City, State Zip: LOS ANGELES, CA 90230

Phone: (310) 741-1018 Fax: (310) 202-6410

Record ID: 190798CP
Service Type: RES-DETOX

Resident Capacity: 18 Total Occupancy: 18 Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: A NEW START TREATMENT AND RECOVERY CENTER, LLC
Legal Name: A NEW START TREATMENT AND RECOVERY CENTER, LLC

Address: 4111, 4113, 4115, 4117 MILTON AVENUE

City, State Zip: CULVER CITY, CA 90232

Phone: (310) 287-1919 Fax: (310) 287-1949

Record ID: 190798DP
Service Type: RES-DETOX

Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: VALLEY HOPE OUTPATIENT

Legal Name: FERNANDO RODRIGUEZ

Address: 14416 FRIAR STREET, SUITE C

City, State Zip: VAN NUYS, CA 91401

Phone: (818) 902-1100 Fax: (818) 902-1300

Record ID: 190803AP

Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: THE VILLAGE FAMILY SERVICES

Legal Name: THE VILLAGE FAMILY SERVICES, INC.

Address: 6736 LAUREL CANYON BOULEVARD, SUITE 200

City, State Zip: NORTH HOLLYWOOD, CA 91606

Phone: (818) 755-8786 Fax: (818) 755-8789

Record ID: 190804AN
Service Type: NON
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: THE VILLAGE FAMILY SERVICES ALCOHOL AND SUBSTANCE USE TREATMENT PROGRAM

Legal Name: THE VILLAGE FAMILY SERVICES, INC. Address: 6801 COLDWATER CANYON AVENUE,

E1

City, State Zip: NORTH HOLLYWOOD, CA 91605

Phone: (818) 755-8786 Fax: (818) 755-8789

Record ID: 190804BN
Service Type: NON
Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: NULIFE OUTPATIENT

Legal Name: HARP, LLC, THE

Address: 4232 LAS VIRGENES ROAD, SUITE B

City, State Zip: CALABASAS, CA 91302 Phone: (888) 508-1179

Record ID: 190805DP Service Type: NON

Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: CENTRAL CITY COMMUNITY HEALTH CENTER, INC. Legal Name: CENTRAL CITY COMMUNITY HEALTH CENTER, INC.

Address: 5970 S. CENTRAL AVENUE City, State Zip: LOS ANGELES, CA 90022

Phone: (323) 724-0019 Fax: (323) 724-3539

Record ID: 190806AN Service Type: NON

Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: THE VILLA TREATMENT CENTER
Legal Name: THE VILLA TREATMENT CENTER, LLC

Address: 5051 HOOD DRIVE

City, State Zip: WOODLAND HILLS, CA 91364

Phone: (747) 226-0187 Fax: (818) 975-5414

Record ID: 190807AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name:BIENESTAR DRUG TREATMENT PROGRAMLegal Name:BIENESTAR HUMAN SERVICES, INC.Address:8134 VAN NUYS BOULEVARD, SUITE 200

City, State Zip: PANORAMA CITY, CA 91402

Phone: (818) 908-3820 Fax: (818) 908-3844

Record ID: 190808AN

Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: BLVD CENTERS
Legal Name: BLVD CENTERS, INC.

Address: 1776 NORTH HIGHLAND AVENUE City, State Zip: LOS ANGELES, CA 90028

Phone: (424) 281-6147 Fax: (213) 262-2082

Record ID: 190810AP
Service Type: NON
Target Population: 1.8

Expiration Date: 6/30/2018 IMS: No

Program Name:BLVD CENTERSLegal Name:BLVD CENTERS, INC.Address:1608 SAWTELLE BOULEVARDCity, State Zip:LOS ANGELES, CA 90025

Phone: (425) 285-8054

Record ID: 190810BP
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: FREEHAB

Legal Name: THE TEEN PROJECT, INC. Address: 8140 SUNLAND BOULEVARD City, State Zip: SUN VALLEY, CA 91352

Phone: (949) 283-1260 Fax: (818) 582-8836

Record ID: 190811AN

Service Type: RES
Resident Capacity: 74
Total Occupancy: 74
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: LOS ANGELES LGBT CENTER Legal Name: LOS ANGELES LGBT CENTER

Address: 1625 N. SCHRADER BOULEVARD, SUITE 106, 114K, 202A, 402 & 405

City, State Zip: LOS ANGELES, CA 90028

Phone: (323) 993-7448 Fax: (323) 308-4041

Record ID: 190812AN Service Type: NON

Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: SOBER STAGES INC. OUTPATIENT PROGRAM

Legal Name: SOBER STAGES INCORPORATED OUTPATIENT PROGRAM

Address: 19562 VENTURA BOULEVARD, SUITE 233

City, State Zip: TARZANA, CA 91356

Phone: (818) 705-6363 Fax: (818) 705-4449

Record ID: 190813AP
Service Type: NON

Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: CLIFFSIDE MALIBU OUTPATIENT SERVICES
Legal Name: CLIFFSIDE MALIBU OUTPATIENT SERVICES

Address: 28990 WEST PACIFIC COAST HIGHWAY, SUITE 203

City, State Zip: MALIBU, CA 90265

Phone: (310) 457-3999 Fax: (310) 457-6047

Record ID: 190815AP
Service Type: NON
Target Population: 1.8

Expiration Date: 9/30/2018 IMS: No

Program Name: HAVEN HOUSE
Legal Name: HAVEN HOUSE, INC.
Address: 2252 HILLSBORO AVENUE

City, State Zip: LOS ANGELES, CA 90034

Phone: (310) 876-0988 **Record ID: 190816AP**

Service Type: RES-DETOX Resident Capacity: 6 Total Occupancy: 6

Target Population: 1.1
Expiration Date: 12/31/2018

Expiration Date: 12/31/2018 IMS: No

Program Name: ROOTS THROUGH RECOVERY

Legal Name: ROOTS, INC.

3939 ATLANTIC AVENUE, SUITE # 102 Address:

City, State Zip: LONG BEACH, CA 90807

Phone: (562) 473-0827

Record ID: 190817AP Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2018 IMS:

A STEP IN THE RIGHT DIRECTION INTENSIVE OUTPATIENT PROGRAM Program Name:

A STEP IN THE RIGHT DIRECTION Legal Name: Address: 9535 RESEDA BOULEVARD, SUITE 300

City, State Zip: NORTHRIDGE, CA 91324

Phone: (818) 231-1400 Fax: (747) 224-0003

Record ID: 190818AP Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: NEW DIRECTIONS ALCOHOL & DRUG SERVICES, INC. Legal Name: NEW DIRECTIONS ALCOHOL AND DRUG SERVICES, INC.

1331 WEST AVENUE J, SUITE 206 Address:

City, State Zip: LANCASTER, CA 93534

Phone: (661) 942-2255 Fax: (661) 949-1480

Record ID: 190819AN

Service Type: NON

Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

LAT INTENSIVE OUTPATIENT PROGRAMS, INC. Program Name: Legal Name: LAT INTENSIVE OUTPATIENT PROGRAMS INC. Address: 11936 JEFFERSON BOULEVARD, SUITE D

City, State Zip: CULVER CITY, CA 90230

Phone: (310) 572-7000 Fax: (310) 572-7003

Record ID: 190820AP Service Type: NON

Target Population: 1.1

Expiration Date: 11/30/2018 IMS: Nο

Program Name: CLUB SOBA

Legal Name: SOBA CHEVIOT HILLS LLC Address: 3384 MOTOR AVENUE

City, State Zip: LOS ANGELES, CA 90034-3712

Phone: (310) 457-5250

Record ID: 190822AP Service Type: NON Target Population: 1.1

Expiration Date: 11/30/2018 TMS: Nο

CROSSROADS RECOVERY CENTERS Program Name:

Legal Name: DIVINE REHABILITATION, EDUCATION, & HOUSING NETWORK

Address: 11503 GLADHILL ROAD City, State Zip: WHITTIER, CA 90604

Phone: (877) 293-0722 Fax: (562) 393-4442

Record ID: 190824AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

2/28/2019 Expiration Date: IMS: Program Name: MALIBU BALANCE DAY TREATMENT, INC. Legal Name: MALIBU BALANCE DAY TREATMENT INC. 4505 LAS VIRGENES ROAD, SUITE 200, 201 Address:

City, State Zip: CALABASAS, CA 91302

Phone: (818) 880-0800 Record ID: 190826AP Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: WESTSIDE TREATMENT

WESTSIDE TREATMENT, LLC Legal Name:

Address: 11150 W. OLYMPIC BOULEVARD, #760

City, State Zip: LOS ANGELES, CA 90064

Phone: (424) 835-6183 Fax: (310) 943-3883

Record ID: 190827AP Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: ALTERNATIVES BEHAVIORAL HEALTH, LLC Legal Name: ALTERNATIVES BEHAVIORAL HEALTH, LLC

822 S. ROBERTSON BOULEVARD, SUITE 300 Address:

City, State Zip: LOS ANGELES, CA 90035

Phone: (888) 532-9137 Fax: (888) 739-6925

Record ID: 190829AP

Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

SEA CHANGE SANTA MONICA Program Name:

Legal Name: SEA CHANGE SANTA MONICA, L.P. Address: 1831 WILSHIRE BOULEVARD, #C

City, State Zip: SANTA MONICA, CA 90403

Phone: (424) 268-4322 Fax: (310) 998-8696

Record ID: 190831AP Service Type: NON-DETOX

Target Population: 1.1

7/31/2019 Expiration Date: TMS: Nο

Program Name: SEA CHANGE SANTA MONICA

Legal Name: SEA CHANGE SANTA MONICA, L.P.

1051 PRINCETON STREET Address: City, State Zip: SANTA MONICA, CA 90403

Phone: (888) 823-3310 Fax: (323) 843-9800

Record ID: 190831BP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.2

11/30/2018 IMS: Expiration Date: Yes

Program Name: AWAKENINGS

Legal Name: AGOURA NEUROFEEDBACK, INC. 28720 ROADSIDE DRIVE, #200 Address: City, State Zip: AGOURA HILLS, CA 91301

(310) 848-5418 (858) 348-8097 Phone: Fax:

Record ID: 190833AP Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No Program Name: HILLS TREATMENT CORP.

Legal Name: MALIBU HILLS TREATMENT CORP.

Address: 265 WESTLAKE BOULEVARD

City, State Zip: MALIBU, CA 90265

Phone: (818) 706-9000 Fax: (818) 706-9009

Record ID: 190834BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: MALIBU HILLS TREATMENT CORP.
Legal Name: MALIBU HILLS TREATMENT CORP.

Address: 415 WESTLAKE BOULEVARD

City, State Zip: MALIBU, CA 90265

Phone: (818) 706-9000 Fax: (818) 706-9009

Record ID: 190834CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: PASSAGES MALIBU PHP LLC. Legal Name: PASSAGES MALIBU PHP, LLC

Address: 1728 ABBOT KINNEY BOULEVARD, #103

City, State Zip: VENICE, CA 90291

Phone: (310) 595-5831 Fax: (310) 464-6904

Record ID: 190835AP
Service Type: NON

Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: REVIVE DETOX Legal Name: REVIVE DETOX

Address: 360 N. VISTA STREET City, State Zip: LOS ANGELES, CA 90036

Phone: (323) 452-0921 Fax: (323) 544-6079

Record ID: 190836AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: HILLSMAN CENTER
Legal Name: LMPG FOUNDATION, LLC
Address: 1440 E. 41ST STREET

Address: 1440 E. 41ST STREET
City, State Zip: LOS ANGELES, CA 90011

Phone: (323) 231-2585 Fax: (323) 231-8771

Record ID: 190838AP

Service Type: RES
Resident Capacity: 34
Total Occupancy: 38
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: A NEW SOLUTION

Legal Name: CHANGING STEPS NETWORK INC.

Address: 9339 LOUISE AVENUE City, State Zip: NORTHRIDGE, CA 91325

Phone: (818) 477-2874 Fax: (323) 531-2999

Record ID: 190841CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: A NEW SOLUTION

Legal Name: CHANGING STEPS NETWORK INC. Address: 14540 HAMLIN STREET, SUITE I

City, State Zip: VAN NUYS, CA 91411 Phone: (818) 477-2874

Record ID: 190841DP
Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: DESTINATIONS TO RECOVERY

Legal Name: DESTINATIONS TO RECOVERY, LLC
Address: 21051 WARNER CENTER LANE, SUITE 220

City, State Zip: WOODLAND HILLS, CA 91367

Phone: (818) 737-2221 Fax: (310) 728-4039

Record ID: 190842AP
Service Type: NON
Target Population: 1.4

Expiration Date: 8/31/2019 IMS: No

Program Name: DESTINATIONS TO RECOVERY

Legal Name: DESTINATIONS TO RECOVERY, LLC

Address: 6222 WILSHIRE BOULEVARD,

#313

City, State Zip: LOS ANGELES , CA 90048

Phone: (818) 737-2221 Fax: (818) 737-2222

Record ID: 190842BP

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: VALLEY RECOVERY TREATMENT

Legal Name: CALIFORNIA RECOVERY CENTERS LLC

Address: 23304 HAPPY VALLEY DRIVE

City, State Zip: NEWHALL, CA 91321

Phone: (818) 404-6505 Fax: (818) 348-4401

Record ID: 190843AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name:NOVA VITAETREATMENTCENTERLegal Name:NOVA VITAETREATMENTCENTER

Address: 16670 MOORPARK STREET,

#B

City, State Zip: ENCINO, CA 91436 Phone: (818) 422-3442

Record ID: 190844AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 10/31/2017 IMS: No

Program Name: SOVEREIGN HEALTH OF LOS ANGELES II
Legal Name: SATYA HEALTH OF CALIFORNIA, INC.

Address: 5919 W. 74TH STREET City, State Zip: LOS ANGELES, CA 90045

Phone: (949) 276-5553 Fax: (949) 498-2619

Record ID: 190845AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: FOREFRONT HEALTH OF BEVERLY HILLS
Legal Name: SOUTHERN CALIFORNIA RECOVERY, LLC

Address: 1771 SUMMITRIDGE DRIVE City, State Zip: BEVERLY HILLS, CA 90210

Phone: (561) 578-8600 Fax: (561) 578-8601

Record ID: 190848AP
Service Type: RES-DETOX

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

Expiration Date: 5/31/2019 IMS: Yes

Program Name: ANGEL WINGS RECOVERY OF SOUTH BAY
Legal Name: ANGEL WINGS RECOVERY OF SOUTHBAY

Address: 3841 W 130TH STREET
City, State Zip: HAWTHORNE, CA 90250-0000

Phone: (310) 863-7446 Fax: (310) 863-7445

Record ID: 190849BN
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: CLIFFSIDE MALIBU 3
Legal Name: CLIFFSIDE MALIBU 3
Address: 30010 ANDROMEDA LANE
City, State Zip: MALIBU, CA 90265

Phone: (310) 457-3460 Fax: (424) 781-4708

Record ID: 190850AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: CALIFORNIA NEW LIFE DETOX AND RECOVERY HOMES, INC. Legal Name: CALIFORNIA NEW LIFE DETOX AND RECOVERY HOMES, INC.

Address: 18134 CHASE STREET City, State Zip: NORTHRIDGE, CA 91325

Phone: (818) 775-9431 Fax: (828) 626-9794

Record ID: 190851AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: CALIFORNIA NEW LIFE DETOX AND RECOVERY HOMES, INC. Legal Name: CALIFORNIA NEW LIFE DETOX AND RECOVERY HOMES, INC.

Address: 9529 CORBIN AVENUE City, State Zip: NORTHRIDGE, CA 91324

Phone: (818) 554-5600 Fax: (818) 626-9749

Record ID: 190851BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: ALTA CENTERS, INC.
Legal Name: ALTA CENTERS, INC.

Address: 5435 BALBOA BOULEVARD, SUITE 103

City, State Zip: ENCINO, CA 91316

Phone: (844) 663-7465 Fax: (818) 301-2046

Record ID: 190852AP

Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: ALTA CENTERS INC.
Legal Name: ALTA CENTERS, INC.
Address: 6100 RODGERTON DRIVE
City, State Zip: LOS ANGELES, CA 90068

Phone: (818) 616-7443

Record ID: 190852CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: REFUGE RECOVERY CENTERS
Legal Name: REFUGE RECOVERY HOUSE, LLC

Address: 4302 W. MELROSE AVENUE, SUITE 5C

City, State Zip: LOS ANGELES, CA 90029-3511

Phone: (363) 660-0735 Fax: (866) 537-7317

Record ID: 190853AP
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: REFUGE RECOVERY CENTERS
Legal Name: REFUGE RECOVERY HOUSE, LLC

Address: 1007 MANZANITA STREET

City, State Zip: LOS ANGELES, CA 90029-3511

Phone: (323) 787-7077 Fax: (866) 537-7317

Record ID: 190853BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: LAUNCH

Legal Name: MD HOME DETOX CONSULTING, INC

Address: 150 S. BARRINGTON AVENUE, SUITE 8-10

City, State Zip: BRENTWOOD, CA 90049 Phone: (310) 779-4476

Record ID: 190855AP
Service Type: NON
Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: SERVICE INDUSTRIES OUTPATIENT SERVICES

Legal Name: SERVICE INDUSTRIES, INC.
Address: 2500 OVERLAND AVENUE, #D
City, State Zip: LOS ANGELES, CA 90064-3333

Phone: (323) 477-2130 Fax: (310) 253-9801

Record ID: 190856AP

Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: ACCESS MALIBU, INC.
Legal Name: ACCESS MALIBU, INC.
Address: 5247 HORIZON DRIVE
City, State Zip: MALIBU, CA 90265-4215

Phone: (831) 236-1169 Fax: (424) 781-4705

Record ID: 190857AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: RESTORE HEALTH AND WELLNESS CENTER, LLC
Legal Name: RESTORE HEALTH AND WELLNESS CENTER, LLC

Address: 16530 VENTURA BOULEVARD, SUITE 200

City, State Zip: ENCINO, CA 91436

Phone: (818) 806-3194 Fax: (888) 518-1633

Record ID: 190858AP
Service Type: NON
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: RESTORE HEALTH AND WELLNESS CENTER, LLC Legal Name: RESTORE HEALTH AND WELLNESS CENTER, LLC

Address: 10821 BAILE AVENUE

City, State Zip: CHATSWORTH, CA 91311-8405

Phone: (954) 376-3915 Fax: (818) 574-3990

Record ID: 190858BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/1/2018 IMS: No

Program Name: RESTORE HEALTH AND WELLNESS CENTER

Legal Name: RESTORE HEALTH AND WELLNESS CENTER, LLC

Address: 10342 DE SOTO AVE. City, State Zip: CHATSWORTH, CA 91311

Phone: (626) 497-1480 Fax: (818) 574-3990

Record ID: 190858CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: RESTORE HEALTH AND WELLNESS CENTER

Legal Name: RESTORE HEALTH AND WELLNESS CENTER, LLC

Address: 10344 DE SOTO AVE City, State Zip: CHATSWORTH, CA 91311

Phone: (626) 497-1480 Fax: (818) 574-3990

Record ID: 190858DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: LOS ANGELES DETOX LLC
Legal Name: LOS ANGELES DETOX LLC
Address: 522 N. LARCHMONT BOULEVARD

City, State Zip: LOS ANGELES, CA 90004

Phone: (323) 450-2205

Record ID: 190861AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: 1 METHOD CENTER
Legal Name: 1 METHOD, LLC

Address: 10254 BANNOCKBURN DRIVE City, State Zip: LOS ANGELES, CA 90064

Phone: (310) 837-7330 Fax: (310) 837-7376

Record ID: 190862AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: 1 METHOD CENTER Legal Name: 1 METHOD, LLC

1964 WESTWOOD BLVD. #400 Address: City, State Zip: LOS ANGELES, CA 90025

Phone: (310) 837-7330

Record ID: 190862BP Service Type: NON Target Population: 1.8

Expiration Date: 7/31/2019 IMS: No

Program Name: CLEAR RECOVERY CENTER

Legal Name: CLEAR INC.

Address: 201 HERONDO STREET

City, State Zip: REDONDO BEACH, CA 90277

Phone: (310) 346-2676 Fax: (866) 899-1638

Record ID: 190863AP Service Type: NON Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

CLEAR RECOVERY CENTER Program Name:

Legal Name: CLEAR INC.

515 N. SEPULVEDA BOULEVARD, Address:

SUITE B

City, State Zip: MANHATTAN BEACH, CA 90266

(866) 899-1638 Phone: (877) 799-1985 Fax:

Record ID: 190863BP

NON Service Type: Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: BETTY FORD CENTER - WEST LOS ANGELES

Legal Name: HAZELDEN BETTY FORD FOUNDATION

Address: 10700 SANTA MONICA BOULEVARD, SUITE 310

City, State Zip: LOS ANGELES, CA 90025

(310) 446-1818 Phone: (866) 301-4929 Fax:

Record ID: 190864AN NON Service Type:

Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

ALTADENA CENTER Program Name: Legal Name: SHIRLEY BENNETT

3025 NORTH LINCOLN AVENUE Address:

City, State Zip: ALTADENA, CA 91001

Phone: (626) 765-6905 Fax: (626) 765-6617

190865AP Record ID: NON

Service Type:

Target Population: 1.1

10/31/2019 IMS: Expiration Date: No

Program Name: LAKE HUGHES RECOVERY Legal Name: LAKE HUGHES RECOVERY 48745 THREE POINTS ROAD Address: LAKE HUGHES, CA 93532 City, State Zip:

Phone: (661) 724-0001 Fax: (661) 481-3392

Record ID: 190867AP RES-DETOX Service Type:

Resident Capacity: 6 7 Total Occupancy: Target Population: 1.2

Expiration Date: 10/31/2019 IMS: Program Name: SHELBY RECOVERY SERVICES INC. Legal Name: SHELBY RECOVERY SERVICES INC.

Address: 279 E. GREENHAVEN STREET

City, State Zip: COVINA, CA 91722 Phone: (310) 877-8557 190868AP Record ID:

Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: MALIBU DETOX Legal Name: MALIBU DETOX, LLC Address: 22766 SADDLE PEAK ROAD

City, State Zip: TOPANGA, CA 90290

Phone: (818) 208-5695 (310) 919-3185 Fax:

Record ID: 190869AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 10/31/2017 TMS: No

Program Name: MALIBU DETOX Legal Name: MALIBU DETOX, LLC Address: 21965 SADDLE PEAK ROAD City, State Zip: TOPANGA, CA 90290

Phone: (310) 958-4692 Fax: (310) 919-3185

Record ID: 190869BP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

THE ARROYOS DAY TREATMENT PROGRAM Program Name:

Legal Name: THE ARROYOS, INC.

Address: 1 WEST CALIFORNIA BOULEVARD, SUITE 122, 221 & 321

City, State Zip: PASADENA, CA 91105

Phone: (877) 884-8272 Fax: (626) 628-3177

Record ID: 190870AP

Service Type: NON

Target Population: 1.1

10/31/2017 Expiration Date: TMS: No

THRIVE TREATMENT Program Name: THRIVE TREATMENT, LLC Legal Name:

Address: 3101 OCEAN PARK BOULEVARD, SUITE 302 & 309

City, State Zip: SANTA MONICA, CA 90405

(888) 975-8474 Phone:

Record ID: 190871AP Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: MIRACLES IN ACTION Legal Name: MIRACLES IN ACTION, LLC Address: 290 E VERDUGO AVENUE, #105

City, State Zip: BURBANK, CA 91502

(818) 429-9103 (818) 736-5885 Phone: Fax:

Record ID: 190873AP

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No Program Name: ELEVATIONS

Legal Name: ELEVATION BEHAVIORAL HEALTH LLC

Address: 30065 TRIUNFO DRIVE City, State Zip: AGOURA HILLS, CA 91301

Phone: (818) 575-7201 Fax: (818) 575-7201

Record ID: 190874AP
Service Type: RES-DETOX

Resident Capacity: 11 Total Occupancy: 11 Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: DESTINY RECOVERY CENTER LLC

Legal Name: DESTINY RECOVERY CENTER, LLC
Address: 23301 BESSEMER STREET
City, State Zip: WOODLAND HILLS, CA 91367

Phone: (310) 738-0008

Record ID: 190875AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: CALABASAS RESIDENTIAL

Legal Name: PARK MIRAMAR 24650 LLC Address: 24650 PARK MIRAMAR City, State Zip: CALABASAS, CA 91302

Phone: (818) 223-9009 Fax: (818) 223-8999

Record ID: 190876AP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: CALABASAS OUTPATIENT

Legal Name: PARK MIRAMAR 24650 LLC Address: 23951 CRAFTSMAN ROAD,

BUILDING B

City, State Zip: CALABASAS, CA 91302 Phone: (818) 535-5601

Record ID: 190876BP

Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: HARMONY PLACE

Legal Name: JMG INVESTMENTS, INC.
Address: 23041-A HATTERAS STREET
City, State Zip: WOODLAND HILLS, CA 91367-4236

Phone: (818) 796-4369 Fax: (818) 914-4440

Record ID: 190879AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: Yes

Program Name: HARMONY PLACE

Legal Name: JMG INVESTMENTS, INC.
Address: 23041 HATTERAS STREET
City, State Zip: WOODLAND HILLS, CA 91367

Phone: (818) 796-4369 Fax: (818) 914-4440

Record ID: 190879BP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: Yes

Program Name: SEMPRE FAMIGLIA LLC
Legal Name: SEMPRE FAMIGLIA LLC
Address: 10447 LARAMIE AVENUE
City, State Zip: CHATSWORTH, CA 91311

Phone: (818) 447-2458
Record ID: 190880AP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 11/30/2019 IMS: No

RES-DETOX

Program Name: FAITH RECOVERY

Legal Name: FAITH RECOVERY, INC.

Address: 2211 PALO VERDE AVENUE, SUITE C

City, State Zip: LONG BEACH, CA 90815

Phone: (562) 881-2322 Fax: (562) 430-2250

Record ID: 190881AP
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: SOBER COLLEGE

Legal Name: SOBER COLLEGE ENVIRONMENTS, LLC

Address: 6022 VARIEL AVENUE

City, State Zip: WOODLAND HILLS, CA 91367

Phone: (818) 274-0304 Fax: (818) 274-0309

Record ID: 190883AP

Service Type: NON

Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: SOBER COLLEGE

Legal Name: SOBER COLLEGE ENVIRONMENTS, LLC

Address: 22401 OXNARD STREET

City, State Zip: WOODLAND HILLS, CA 91367

Phone: (818) 415-3456 Fax: (818) 301-1935

Record ID: 190883BP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 2/28/2018 IMS: No

Program Name: SOBER COLLEGE

Legal Name: SOBER COLLEGE ENVIRONMENTS, LLC

Address: 8546 KEOKUK AVENUE City, State Zip: WINNETKA, CA 91306

Phone: (747) 302-3763 Fax: (818) 301-1935

Record ID: 190883CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 2/28/2018 IMS: Yes

Program Name: CROSSROAD TRANSITIONAL, INC
Legal Name: CROSSROAD TRANSITIONAL, INC
Address: 19646 BALLINGER STREET

City, State Zip: NORTHRIDGE, CA 91324 Phone: (818) 482-0175

Phone: (818) 482-Record ID: 190884AN

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: LA VENTANA TREATMENT PROGRAMS

Legal Name: RYLIST, INC.

Address: 1243 7TH STREET, SUITE B AND C

City, State Zip: SANTA MONICA, CA 90401

Phone: (424) 231-2420 Fax: (818) 975-5076

Record ID: 190886AP

Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: WISDOM OUTPATIENT CENTER

Legal Name: WISDOM TREATMENT, LLC

Address: 3031 N. SAN FERNANDO BLVD, SUITE 100

City, State Zip: BURBANK, CA 91505

Phone: (832) 312-9611 Fax: (818) 861-7527

Record ID: 190887AP
Service Type: NON
Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: ABOUT FACE: DVIP

Legal Name: ABOUT FACE: DVIP, INC. Address: 3407 W 6TH STREET #700 City, State Zip: LOS ANGELES, CA 90020

Phone: (213) 384-7084 Fax: (213) 384-7653

Record ID: 190888AP

Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: PEGGY ALBRECHT FRIENDLY HOUSE

Legal Name: FRIENDLY HAND FOUNDATION
Address: 347 S NORMANDIE AVENUE
City, State Zip: LOS ANGELES, CA 90020-3167

Phone: (213) 389-9964 Fax: (213) 389-8812

Record ID: 190890AN

Service Type: RES
Resident Capacity: 12
Total Occupancy: 14
Target Population: 1.3

Expiration Date: 6/30/2018 IMS: No

Program Name: SANCTUARY TREATMENT CENTER

Legal Name: SANCTUARY TREATMENT CENTER INC.

Address: 4815 WOODLEY AVENUE City, State Zip: ENCINO, CA 91436 Phone: (408) 836-3698

Record ID: 190891AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: VALLEY DETOX CENTER

Legal Name: ACTIVE RECOVERY SOLUTIONS, LLC Address: 15120 AND 15114 VOSE STREET

City, State Zip: VAN NUYS, CA 91405

Phone: (818) 616-1939 Fax: (424) 343-0011

Record ID: 190892AP
Service Type: RES-DETOX

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: EXIS

Legal Name: EXIS RECOVERY INC.

Address: 2001 S. BARRINGTON AVENUE, SUITE 219

City, State Zip: LOS ANGELES, CA 90025

Phone: (310) 497-6248 Fax: (213) 261-9887

Record ID: 190893AP
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name:THE VIEWLegal Name:THE VIEW LLCAddress:864 TEAKWOOD ROADCity, State Zip:LOS ANGELES, CA 90049

Phone: (760) 409-1287

Record ID: 190894AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: LIGHTHOUSE RECOVERY CENTERS

Legal Name: LIGHTHOUSE RECOVERY CENTERS, LLC

Address: 5242 DARRO ROAD

City, State Zip: LOS ANGELES, CA 91308

Phone: (888) 329-9133 Fax: (818) 279-0550

Record ID: 190896AP
Service Type: RES-DETOX

Resident Capacity: 9
Total Occupancy: 9
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name:ABACUS GUIDANCE CENTER, INC.Legal Name:ABACUS GUIDANCE CENTER, INC.

Address: 312 NORTH ALLEN AVE. City, State Zip: PASADENA, CA 91106-1604

Phone: (626) 241-9280

Record ID: 190897AP
Service Type: NON
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: STEPS TO RECOVERY

Legal Name: STEPS TO RECOVERY, CORP.
Address: 14434 GILMORE STREET
City, State Zip: VAN NUYS, CA 91401
Phone: (818) 905-1422

Record ID: 190898AP
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name:PROFOUND TREATMENTLegal Name:PROFOUND TREATMENT, LLCAddress:1990 WESTWOOD BOULEVARD

SUITE 210

City, State Zip: WEST LOS ANGELES, CA 90025

Phone: (310) 614-4660

Record ID: 190899AP
Service Type: NON
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: INNERACTIONS

Legal Name: INNER+ACTIONS, LLC

Address: 21333 OXNARD STREET, 2ND FLOOR

City, State Zip: WOODLAND HILLS, CA 91367

Phone: (818) 963-4357 Fax: (818) 399-7436

Record ID: 190900AP
Service Type: NON
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: HARMONY PLACE WOODLAND HILLS
Legal Name: VALLEY RESTORATION CENTER, LLC

Address: 22900 VENTURA BOULEVARD, # 300 & #340

City, State Zip: WOODLAND HILLS, CA 91364

Phone: (818) 519-0670

Record ID: 190901AP
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: HAVEN OUTPATIENT CENTER

Legal Name: RECOVERY GRADS, LLC Address: 817 WEST 34TH STREET,

4TH FLOOR

City, State Zip: LOS ANGELES, CA 90089

Phone: (310) 822-1234 Fax: (310) 822-1234

Record ID: 190902AP

Service Type: NON

Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: VENTURA RECOVERY CENTER-NORTHRIDGE

Legal Name: SIESTA HOUSE, LLC
Address: 17433 NORDHOFF STREET
City, State Zip: NORTHRIDGE, CA 91325
Phone: (213) 494-4341

Record ID: 190903AP
Service Type: RES-DETOX

Resident Capacity: 9
Total Occupancy: 9
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: REMEDY DETOX CENTERS
Legal Name: REMEDY DETOX CENTERS, LLC

Address: 4340 MAURY AVENUE City, State Zip: LONG BEACH, CA 90807

Phone: (888) 889-8883 Fax: (562) 446-4345

Record ID: 190904AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 4/30/2018 IMS: No

Program Name: REMEDY DETOX CENTERS
Legal Name: REMEDY DETOX CENTERS, LLC
Address: 1821 E MARSHALL PLACE
City, State Zip: LONG BEACH, CA 90807

Phone: (562) 270-6344 Fax: (562) 446-4340

Record ID: 190904BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 10/31/2018 IMS: No

Program Name: 310 RECOVERY

Legal Name: 310 RECOVERY, INC.
Address: 10533 WASHINGTON BLVD.
City, State Zip: CULVER CITY, CA 90232

Phone: (310) 210-6931 Record ID: 190905AP

Record ID: 1909 Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: LIFE UNCOMMON
Legal Name: LIFE UNCOMMON, LLC

Address: 8616 LA TIJERA BOULEVARD,

#404

City, State Zip: LOS ANGELES , CA 90045

Phone: (310) 463-5521 Fax: (310) 982-2564

Record ID: 190906AP
Service Type: NON
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: MELROSE RECOVERY
Legal Name: MELROSE RECOVERY LLC
Address: 501 N. MARIPOSA AVENUE
City, State Zip: LOS ANGELES, CA 90004
Phone: (702) 901-9079

Record ID: 190907AP

Service Type: RES-DETOX Resident Capacity: 6

Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: BEL AIR VALLEY DETOX

Legal Name: BEL AIR OUTPATIENT CENTER, LLC

Address: 4938 RUBIO AVENUE
City, State Zip: ENCINO, CA 91436
Phone: (310) 869-6211

Record ID: 190908AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: THE VILLA OUTPATIENT SERVICES, LLC
Legal Name: THE VILLA OUTPATIENT SERVICES, LLC

Address: 4463 VAN NUYS BOULEVARD City, State Zip: SHERMAN OAKS, CA 91403

Phone: (818) 205-9069 Fax: (818) 205-9525

No

Record ID: 190909AP Service Type: NON

Target Population: 1.1
Expiration Date: 4/30/2018
IMS:

Program Name: AWAKENINGS PM

Legal Name: CW PSYCHOLOGICAL CORPORATION

Address: 28720 ROADSIDE DRIVE,

SUITE 229

City, State Zip: AGOURA HILLS, CA 91301-6317

Phone: (805) 574-0936

Record ID: 190910AP
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: COMMON BOND REHAB CENTER Legal Name: COMMON BOND REHAB CENTER, LLC

24456 LYONS AVENUE Address: City, State Zip: NEWHALL, CA 91321 (661) 733-1520 Phone:

Record ID: 190912AP Service Type: NON Target Population: 1.1

6/30/2018 Expiration Date: IMS: No

DEDICATO TREATMENT CENTER Program Name:

Legal Name: DEDICATO TREATMENT CENTER INC.

Address: 22 W. CARTER AVENUE City, State Zip: SIERRA MADRE, CA 91024

Phone: (626) 644-8857 Fax: (626) 921-0214

Record ID: 190913AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: LUMINANCE HEALTH GROUP, INC. Legal Name: LUMINANCE HEALTH GROUP, INC.

Address: 3556 SERRA ROAD City, State Zip: MALIBU, CA 90265

(949) 612-2001 Phone: (310) 303-8325 Fax:

Record ID: 190914AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: THE VALLEY PREVENTION & TREATMENT CENTER

Legal Name: VIDA FAMILY CENTER, INC. Address: 4419 VAN NUYS BOULEVARD,

#307

SHERMAN OAKS, CA 91403 City, State Zip:

Phone: (818) 365-7776

Record ID: 190915AP Service Type: NON

Target Population: 1.8

Expiration Date: 7/31/2018 IMS: No

Program Name: THE CAMDEN CENTER, INC. THE CAMDEN CENTER, INC. Legal Name: Address: 10780 SANTA MONICA BOULEVARD,

SUITES 105, 120, 310 City, State Zip: LOS ANGELES , CA 90025

(844) 422-6336 (888) 887-2955 Phone: Fax:

Record ID: 190916AP Service Type: NON-DETOX Target Population: 1.10

Expiration Date: 9/30/2018 IMS: No

Program Name: INTEGRITY TREATMENT PROGRAM Legal Name: INTEGRITY TREATMENT PROGRAM, LLC

Address: 12301 WILSHIRE BOULEVARD,

206

LOS ANGELES , CA 90025 City, State Zip:

Phone: (310) 621-1536

Record ID: 190917AP Service Type: NON

Target Population: 1.1

7/31/2018 Expiration Date: IMS: No Program Name: BARBARA CARE HEALTH SOLUTIONS, INC.
Legal Name: BARBARA CARE HEALTH SOLUTIONS, INC.

Address: 323 N. PRAIRIE AVENUE,

401-A

City, State Zip: INGLEWOOD, CA 90301 Phone: (323) 829-0234

Record ID: 190918AP
Service Type: NON
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: PASSAGES BEVERLYWOOD
Legal Name: PASSAGES BEVERLYWOOD, LLC
Address: 2370 SOUTH ROBERTSON BOULEVARD
City, State Zip: LOS ANGELES, CA 90034-2029

Phone: (323) 694-9680 Fax: (424) 298-8034

Record ID: 190919AP
Service Type: NON
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: LIFESYNC RECOVERY AND DETOXIFICATION CENTER
Legal Name: LIFESYNC RECOVERY AND DETOXIFICATION, LLC

Address: 6025 MURPHY WAY City, State Zip: MALIBU, CA 90265

Phone: (818) 991-5433 Fax: (818) 991-5423

Record ID: 190920AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: SILICON BEACH OUTPATIENT CENTER, LLC Legal Name: SILICON BEACH OUTPATIENT CENTER, LLC

Address: 8939 S. SEPULVEDA BOULEVARD,

414

City, State Zip: LOS ANGELES, CA 90045-2334

Phone: (310) 795-0542

Record ID: 190921AP
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: SEWELL TREATMENT CENTER

Legal Name: FRED JEFFERSON MEMORIAL HOMES FOR BOYS

Address: 152 WEST WALNUT STREET,

#150

City, State Zip: CARSON, CA 90248

Phone: (310) 763-1660 Fax: (310) 886-3258

Record ID: 190922AN

Service Type: NON Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: AXIS RESIDENTIAL TREATMENT - WEST
Legal Name: AXIS RESIDENTIAL TREATMENT - WEST, LLC

Address: 4022-4024 HURON AVENUE City, State Zip: CULVER CITY, CA 90232

Phone: (310) 838-3640 Fax: (310) 838-3642

Record ID: 190923AP
Service Type: RES-DETOX

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name:FOUNDATIONS LOS ANGELESLegal Name:CANYON WEST LOS ANGELES, LLC.Address:17167 W. VENTURA BOULEVARD

City, State Zip: ENCINO, CA 91316
Phone: (818) 464-1700
Record ID: 190924AP

Record ID: 1909 Service Type: NON Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: SOBERGUARD RECOVERY CENTER

Legal Name: SG DETOX 5156 LLC
Address: 5156 BASCULE AVENUE
City, State Zip: WOODLAND HILLS, CA 91364

Phone: (818) 456-4658

Record ID: 190925AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: MPBH RECOVERY CENTER

Legal Name: MOTION PICTURE BEHAVIORAL HEALTH, INC.

Address: 5210 VISTA MIGUEL DRIVE City, State Zip: LA CANADA, CA 91101 Phone: (951) 427-4807

Record ID: 190926AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: PACIFIC VIEW RECOVERY CENTER

Legal Name: PACIFIC VIEW RECOVERY CENTER, LLC

Address: 643 PACIFIC STREET, UNITS 1, 2, 3, & 4 City, State Zip: SANTA MONICA, CA 90405

Phone: (310) 392-2320 Fax: (310) 392-2331

Record ID: 190927AP
Service Type: RES-DETOX

Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: AXIS LLC
Legal Name: AXIS LLC

Address: 3215 CHEVIOT VISTA PLACE City, State Zip: LOS ANGELES, CA 90034

Phone: (310) 202-1593 Fax: (310) 202-7604

Record ID: 190928AP
Service Type: RES-DETOX

Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: THINK AND BE TREATMENT CENTER
Legal Name: THINK AND BE TREATMENT CENTER
Address: 4955 VAN NUYS BOULEVARD,

SUITE 200

City, State Zip: SHERMAN OAKS, CA 91403

Phone: (310) 926-5935 Fax: (818) 981-1510

Record ID: 190929AP

Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

MANIFEST RECOVERY Program Name:

Legal Name: DOLOROSA OPERATIONS, LLC Address: 22209 DOLOROSA STREET City, State Zip: WOODLAND HILLS, CA 91367

Phone: (949) 929-4802

Record ID: 190930AP Service Type: RES-DETOX

Resident Capacity: 6 6 Total Occupancy: Target Population: 1.1

Expiration Date: 8/31/2018 IMS:

Program Name: PSYCHOLOGICAL CARE AND HEALING CENTER

Legal Name: PCH TREATMENT, INC. Address: 11965 VENICE BOULEVARD,

SUITES 200, 201, 202, 203, 204, 205, 207, 209, 210, 307, 308, 310, 311

City, State Zip: LOS ANGELES, CA 90066

Phone: (310) 566-7625 Fax: (310) 566-7629

Record ID: 190931AP Service Type: NON Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: PEACE BY PIECE TREATMENT CENTER, INC. Legal Name: PEACE BY PIECE TREATMENT CENTER, INC.

Address: 5343 SHIRLEY AVENUE City, State Zip: TARZANA, CA 91356

(800) 971-6553 (800) 971-6553 Phone: Fax:

Record ID: 190932AP Service Type: RES-DETOX

Resident Capacity: Total Occupancy: 6 Target Population: 1.1

9/30/2018 IMS: Expiration Date: No

TRIUMPH RECOVERY Program Name: Legal Name: TRIUMPH RECOVERY

Address: 13252 MAGNOLIA BOULEVARD City, State Zip: SHERMAN OAKS, CA 91423

Phone: (818) 736-9891 Fax: (818) 736-9893

Record ID: 190933AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 9/30/2018 TMS: Nο

Program Name: DESIGN FOR LIVING Legal Name: DESIGN FOR LIVING Address: 3239 WEST AVENUE K-1 City, State Zip: LANCASTER, CA 93536

Phone: (818) 219-1912 Fax: (661) 793-7231

Record ID: 190934AN Service Type: RES

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.2

IMS: Expiration Date: 10/31/2018 No

Program Name: APPLIED LA, LLC APPLIED LA, LLC Legal Name:

Address: 11340 W OLYMPIC BOULEVARD,

SUITE 305

City, State Zip: LOS ANGELES , CA 90064

Phone: (888) 583-0002 Fax: (760) 406-4254

Record ID: 190935AP

Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: CAST CENTERS IOP Legal Name: CAST CENTERS LLC 630 N. DOHENY DRIVE Address: City, State Zip: WEST HOLLYWOOD, CA 90069

Fax: (310) 564-1883 Phone: (626) 437-2374

Record ID: 190936AP Service Type: NON

Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: CASA BELLA

Legal Name: CASA BELLA SOBERLIVING-WEST

Address: 1937 FEDERAL AVENUE City, State Zip: LOS ANGELES, CA 90025

Phone: (818) 923-3929

Record ID: 190937AP

Service Type: RES Resident Capacity: 6 Total Occupancy: 6
Target Population: 1.3

Expiration Date: 12/31/2018 IMS:

VICTORY DETOX CENTER Program Name:

Legal Name: PROGRESSIVE RECOVERY SOLUTIONS, LLC

Address: 8150 MORSE AVENUE

City, State Zip: NORTH HOLLYWOOD, CA 91605

Phone: (818) 922-2458 Fax: (818) 922-2457

Record ID: 190938AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

12/31/2018 IMS: Expiration Date: Nο

Program Name: HATHAWAY RECOVERY

Legal Name: DESTINY RECOVERY, INC. 784 EAST POMELLO DRIVE Address: City, State Zip: CLAREMONT, CA 91711 (909) 971-3333 Phone:

Record ID: 190939AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 8/31/2018 TMS: Nο

OAKS OF HOPE Program Name: Legal Name: OAKS OF HOPE LLC Address: 26525 JOSEL DRIVE

City, State Zip: CANYON COUNTRY, CA 91387

(661) 298-6191 Phone: Record ID: 190940AP

Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 7 Target Population: 1.1

IMS: Expiration Date: 10/31/2018 No

Program Name: RECOVERY GUILD

Legal Name: AMERICAN INSTITUTE OF ADDICTION MEDICINE, LLC

12400 AND 12406 W. MAGNOLIA BOULEVARD Address:

City, State Zip: VALLEY VILLAGE, CA 91607

Fax: (818) 452-3700 Phone: (818) 495-4300

Record ID: 190942AP Service Type: RES-DETOX

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No Program Name:IRIS HEALING RETREATLegal Name:IRIS HEALING RETREAT LLCAddress:23033 OSTRONIC DRIVE,City, State Zip:LOS ANGELES, CA 91367

Phone: (323) 449-0016

Record ID: 190943AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: WESTWIND OUTPATIENT SERVICES

Legal Name: JAZ CAPITAL INVESTMENTS, LLC

Address: 640 S. SAN VICENTE BOULEVARD, SUITE 410 & 482

City, State Zip: LOS ANGELES, CA 90048

Phone: (323) 302-9721 **Record ID: 190945AP**Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: STAN PRICE REENTRY CENTER

Legal Name: CENTER FOR HEALTH JUSTICE, INC. Address: 900 AVILA STREET, SUITES 102 & 301

City, State Zip: LOS ANGELES, CA 90012

Phone: (213) 229-0985 Fax: (213) 229-0986

Record ID: 190946AN

Service Type: NON

Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name:OPEN HEART RECOVERYLegal Name:OPEN HEART RECOVERYAddress:4026 6TH AVENUE

City, State Zip: LOS ANGELES, CA 90008

Phone: (323) 389-8894 Fax: (310) 671-2306

Record ID: 190947AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: LANDMARK RECOVERY CENTER
Legal Name: LANDMARK RECOVERY LLC.

Address: 2172 ARGYLE AVE.

City, State Zip: LOS ANGELES, CA 90068

Phone: (818) 486-2755

Record ID: 190949AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: OVERLAND IOP

Legal Name: HK MANAGEMENT COMPANY LLC

Address: 3415 OVERLAND AVE
City, State Zip: LOS ANGELES, CA 90034

Phone: (310) 876-0407 Fax: (310) 876-0313

Record ID: 190950AP

Service Type: NON Target Population: 1.8

Expiration Date: 12/31/2018 IMS: No

Program Name: CHANDLER TREATMENT LLC
Legal Name: CHANDLER TREATMENT, LLC
Address: 5503 CAHUENGA BLVD, SUITE 201
City, State Zip: NORTH HOLLYWOOD, CA 91601

Phone: (818) 538-1527

Record ID: 190952AP
Service Type: NON
Target Population: 1.8

Expiration Date: 12/31/2018 IMS: No

Program Name: MALIBU SUNLIFE

Legal Name: SUNLIFE RECOVERY CENTERS, LLC Address: 31508 ANACAPA VIEW DRIVE

City, State Zip: MALIBU, CA 90265

Phone: (310) 457-0808 Fax: (310) 457-0808

Record ID: 190954AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.8

Expiration Date: 2/28/2019 IMS: No

Program Name: VICTORIA'S HOUSE RESIDENTIAL

Legal Name: VICTORIA'S HOUSE, LLC
Address: 1813 12TH STREET, UNIT E
City, State Zip: SANTA MONICA, CA 90404

Phone: (310) 581-5746 Fax: (310) 581-5748

Record ID: 190955AP
Service Type: RES-DETOX

Resident Capacity: 5
Total Occupancy: 5
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: VICTORIA'S HOUSE RESIDENTIAL

Legal Name: VICTORIA'S HOUSE, LLC
Address: 1813 12TH STREET, UNIT F
City, State Zip: SANTA MONICA, CA 90404

Phone: (310) 581-5746 Fax: (310) 581-5748

Record ID: 190955BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: HEALTHY LIVING RESIDENTIAL PROGRAM
Legal Name: HEALTHY LIVING AND LIFESTYLE, INC.

Legal Name: HEALTHY LIVING AND LIFESTYL Address: 22512 GARZOTA DRIVE

City, State Zip: SANTA CLARITA, CA 91350

Phone: (661) 523-7676 Fax: (661) 523-7676

Record ID: 190956AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: MALIBU OUTPATIENT

Legal Name: MALIBU OUTPATIENT, INC.

Address: 28955 PACIFIC COAST HIGHWAY, SUITE 210

City, State Zip: MALIBU, CA 90265 Phone: (310) 975-5344

Record ID: 190958AP
Service Type: NON
Target Population: 1.7

Expiration Date: 12/31/2018 IMS: No

Program Name: HELPING HANDS REHABILITATION CLINIC, INC. Legal Name: HELPING HANDS REHABILITATION CLINIC, INC.

Address: 8714 N. SEPULVEDA BLVD. City, State Zip: NORTH HILLS, CA 91343

Phone: (818) 833-0999

Record ID: 190959AP
Service Type: NON
Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: SERENITY TRAUMA HEALING CENTER

Legal Name: SERENITY FAMILY AND PSYCHOLOGICAL COUNSELING CENTER, P.C.

Address: 881 ALMA REAL DRIVE, SUITE 310 City, State Zip: PACIFIC PALISADES, CA 90272

Phone: (310) 310-9249 Fax: (310) 454-7240

Record ID: 190960AP
Service Type: NON
Target Population: 1.7

Expiration Date: 4/30/2019 IMS: No

Program Name: CONCLUSIONS TREATMENT

Legal Name: CONCLUSIONS TREATMENT, LLC. Address: 10200 SEPULVEDA BLVD, SUITE 370

City, State Zip: MISSION HILLS, CA 91345

Phone: (818) 221-3076 Fax: (818) 221-3077

Record ID: 190961AP Service Type: NON

Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: INSIGHT HEALTH AND WELLNESS, LLC
Legal Name: INSIGHT HEALTH AND WELLNESS, LLC
Address: 8920 WILSHIRE BLVD, SUITE 310

City, State Zip: LOS ANGELES, CA 90211

Phone: (310) 456-8451 Fax: (888) 891-2295

Record ID: 190962AP
Service Type: NON-DETOX

Target Population: 1.7

Expiration Date: 5/31/2019 IMS: No

Program Name: 5 RES DETOX Legal Name: 5 RES DETOX, LLC

Address: 10902 RIVERSIDE DRIVE, #B City, State Zip: NORTH HOLLYWOOD, CA 91602

Phone: (323) 608-2280

Record ID: 190964AP
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: HONEY CENTER, INC.
Legal Name: HONEY CENTER, INC.

Address: 1436 S. LA CIENEGA BLVD, SUITE 208A

City, State Zip: LOS ANGELES, CA 90035

Phone: (866) 818-0321 Record ID: 190965AP

Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: INFINITY MALIBU
Legal Name: INFINITY MALIBU, LLC
Address: 27475 WINDING WAY
City, State Zip: MALIBU, CA 90265

Phone: (818) 855-8587 Fax: (818) 616-3271

Record ID: 190966AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name:INFINITY MALIBU IOPLegal Name:INFINITY MALIBU IOP, LLCAddress:28035 DOROTHY DRIVE, SUITE 110

City, State Zip: AGOURA HILLS, CA 91301

Phone: (818) 855-8587 Fax: (818) 616-3271

Record ID: 190967AP
Service Type: NON
Target Population: 1.7

Expiration Date: 10/31/2017 IMS: No

Program Name: WEST PALMS DETOX

Legal Name: PACIFIC RECOVERY SOLUTIONS LLC

Address: 3229 HILLOCK DRIVE City, State Zip: LOS ANGELES, CA 90068

Phone: (918) 804-7684

Record ID: 190969AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: Yes

Program Name: PULSE TREATMENT CENTER

Legal Name: PULSE TREATMENT CENTER, INC. Address: 5530 CORBIN AVENUE, SUITE 145

City, State Zip: TARZANA, CA 91356

Phone: (949) 293-2278 Fax: (818) 286-1582

Record ID: 190970AP

Service Type: NON

Target Population: 1.7

Expiration Date: 3/31/2019 IMS: No

Program Name: HILLSIDE MALIBU CORP.
Legal Name: HILLSIDE MALIBU CORP.

Address: 4505 LAS VIRGENES, SUITE 211

City, State Zip: CALABASAS, CA 91302

Phone: (818) 706-9000 Fax: (818) 706-9009

Record ID: 190971AP

Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: PRECIOUS TREATMENT
Legal Name: PRECIOUS TREATMENT
Address: 4381 VANALDEN AVE.
City, State Zip: TARZANA, CA 91356

Phone: (213) 216-1545 Fax: (818) 280-8063

Record ID: 190975AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: RENEWAL SOBRIETY LLC
Legal Name: RENEWAL SOBRIETY LLC

Address: 6442 COLDWATER CANYON AVE #200 City, State Zip: NORTH HOLLYWOOD, CA 91606

Phone: (917) 374-4215

Record ID: 190976AP
Service Type: NON
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name:INTEGRATED RECOVERY NETWORKLegal Name:INTEGRATED RECOVERY NETWORKAddress:2010 WILSHIRE BLVD, SUITE 1012

City, State Zip: LOS ANGELES, CA 90057

Phone: (213) 977-9447 Fax: (213) 402-2807

Record ID: 190978AN
Service Type: NON
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: THE WAY OUT SO CAL, INC.
Legal Name: THE WAY OUT SO CAL, INC.
Address: 28118 BOUQUET CANYON ROAD
City, State Zip: SANTA CLARITA, CA 91350

Phone: (661) 296-4444 Fax: (661) 296-6666

Record ID: 190979AP
Service Type: NON
Target Population: 1.7

Expiration Date: 5/31/2019 IMS: No

Program Name: NEW U BEGINNINGS
Legal Name: NEW U BEGINNINGS INC
Address: 5205 AGNES AVE.

City, State Zip: VALLEY VILLAGE, CA 91607

Phone: (818) 962-1031 Fax: (818) 962-1032

Record ID: 190980AP

Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: FORWARD RECOVERY SOLUTIONS

Legal Name: FORWARD RECOVERY SOLUTIONS, LLC

Address: 9740 WEST PICO BLVD. City, State Zip: LOS ANGELES, CA 90035

Phone: (310) 945-0344

Record ID: 190981AP
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: NOVO DETOX

Legal Name: NOVO MEDICAL DETOXIFICATION CENTERS OF LOS ANGELES, INC.

Address: 11346 THURSTON PLACE City, State Zip: LOS ANGELES, CA 90049

Phone: (310) 308-2038

Record ID: 190982AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: Yes

Program Name: REBOS DETOX

Legal Name: LOST SHEEP, L.L.C.
Address: 4198 SUNSWEPT DRIVE
City, State Zip: STUDIO CITY, CA 91604

Phone: (310) 699-1005 Fax: (310) 694-3278

Record ID: 190984AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name:MANIFEST RECOVERY CENTERSLegal Name:MANIFEST VALLEY WELLNESS, LLCAddress:18663 VENTURA BLVD, SUITE 300

City, State Zip: TARZANA, CA 91356

Phone: (818) 963-9319 Fax: (818) 657-7285

Record ID: 190987AP
Service Type: NON
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: TAJ TREATMENT CENTER

Legal Name: TAJ TREATMENT CENTERS, INC.
Address: 979 E. WASHINTON BLVD
City, State Zip: PASADENA, CA 91104

Phone: (626) 644-7525

Record ID: 190988AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: LIFE QUESTS

Legal Name: LIFE QUESTS LLC

Address: 1315 N. BULLIS ROAD, #2

City, State Zip: COMPTON, CA 90221 Phone: (818) 284-7464

Record ID: 190989AP
Service Type: NON

Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: MULTICONCEPTS RECOVERY

Legal Name: CONCEPTS TREATMENT CENTERS LLC Address: 210 N. PASS AVENUE, SUITE 202

City, State Zip: BURBANK, CA 91505 Phone: (818) 390-4676

Record ID: 190991AP
Service Type: NON
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: PARADISE DETOX
Legal Name: PARADISE DETOX
Address: 5935 JOEL LANE
City, State Zip: LA MESA, CA 91942
Phone: (786) 709-7912

Record ID: 370172AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

As of 11/1/2017

Madera County

Program Name: VALLEY TEEN RANCH RESIDENTIAL TREATMENT GROUP HOME
Legal Name: VALLEY TEEN RANCH
Address: 10535 ROAD 35
City, State Zip: MADERA, CA 93638
Phone: (559) 635-1110 Fax: (559) 538-5004

Phone: (559) 635-1110 Fax: (559) 538-5004

Record ID: 200001AN

Service Type: NON Target Population: 1.11
Expiration Date: 10/31/2017 IMS:

No

As of 11/1/2017

Marin County

Program Name: CENTER POINT - THE MANOR

Legal Name: CENTER POINT, INC.

Address: 603 D STREET

City, State Zip: SAN RAFAEL, CA 94901

Phone: (415) 454-9444 Fax: (415) 492-8844

Record ID: 210002BN

Service Type: RES
Resident Capacity: 40
Total Occupancy: 40
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: THE VILLAGE

Legal Name: CENTER POINT, INC.

Address: 1477-1483 LINCOLN AVENUE City, State Zip: SAN RAFAEL, CA 94901

Phone: (415) 454-9444

Record ID: 210002FN
Service Type: RES
Resident Capacity: 44
Total Occupancy: 44
Target Population: 1.4

Expiration Date: 8/31/2019 IMS: No

Program Name: CENTER POINT OUTPATIENT SERVICES

Legal Name: CENTER POINT, INC.

Address: 1601 SECOND STREET, SUITE 104 AND SUITE 108

City, State Zip: SAN RAFAEL, CA 94901

Phone: (415) 456-6655 Fax: (415) 492-8844

Record ID: 210002GN

Service Type: NON Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: RITTER CENTER Legal Name: RITTER CENTER

Address: 190 MILL STREET, DINING ROOM City, State Zip: SAN RAFAEL, CA 94901-4021

Phone: (415) 457-8182 Fax: (415) 689-9050

Record ID: 210003AN
Service Type: NON
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: SAFETY NET PROGRAM AT NEW BEGINNINGS CENTER

Legal Name: RITTER CENTER

Address: 1399 N. HAMILTON PARKWAY, CLASSROOM #2

City, State Zip: SAN RAFAEL, CA 94949-8206

Phone: (415) 457-8182 Fax: (415) 689-9050

Record ID: 210003BN
Service Type: NON
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name:BAY AREA COMMUNITY RESOURCESLegal Name:BAY AREA COMMUNITY RESOURCES, INC.

Address: 171 CARLOS DRIVE City, State Zip: SAN RAFAEL, CA 94903

Phone: (415) 444-5580 Fax: (415) 444-5598

Record ID: 210005BN
Service Type: NON
Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: BAY AREA COMMUNITY RESOURCES--IN CUSTODY PROGRAM

Legal Name: BAY AREA COMMUNITY RESOURCES, INC.

Address: 13 PETER BEHR DRIVE City, State Zip: SAN RAFAEL, CA 94903

Phone: (415) 755-2328 Fax: (415) 755-2228

Record ID: 210005CN Service Type: NON

Target Population: 1.2

Expiration Date: 5/31/2019 IMS: No

Program Name: POSITIVE CHANGES WOMEN'S PROGRAM
Legal Name: BAY AREA COMMUNITY RESOURCES, INC.

Address: 103 SHORELINE PARKWAY SUITES 101 & 201

City, State Zip: SAN RAFAEL, CA 94901

Phone: (415) 328-6269 Fax: (415) 755-2228

Record ID: 210005DN Service Type: NON

Target Population: 1.4

Expiration Date: 10/31/2018 IMS: No

Program Name: SERENITY KNOLLS
Legal Name: SERENITY KNOLLS
Address: 145 TAMAL ROAD

City, State Zip: FOREST KNOLLS, CA 94933

Phone: (415) 488-0400 Fax: (415) 488-1955

Record ID: 210011AP
Service Type: RES-DETOX

Resident Capacity: 30 Total Occupancy: 32 Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: THE HELEN VINE RECOVERY CENTER

Legal Name: BUCKELEW PROGRAMS
Address: 301 SMITH RANCH ROAD
City, State Zip: SAN RAFAEL, CA 94903

Phone: (415) 492-0818 Record ID: 210017DN

Record ID: 210017DN Service Type: RES-DETOX

Resident Capacity: 26
Total Occupancy: 26
Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: BAYSIDE MARIN II
Legal Name: BAYSIDE MARIN, INC.
Address: 189 BAYVIEW DRIVE
City, State Zip: SAN RAFAEL, CA 94901

Phone: (415) 721-2000

Record ID: 210030AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: BAYSIDE MARIN I
Legal Name: BAYSIDE MARIN, INC.
Address: 191 BAYVIEW DRIVE
City, State Zip: SAN RAFAEL, CA 94901

Phone: (415) 721-2000

Record ID: 210030BP Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: BAYSIDE MARIN OUTPATIENT PROGRAM

Legal Name: BAYSIDE MARIN, INC.
Address: 718 4TH STREET
City, State Zip: SAN RAFAEL, CA 94901
Phone: (415) 721-2000

Record ID: 210030CP
Service Type: NON
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: BAYSIDE MARIN III
Legal Name: BAYSIDE MARIN, INC.
Address: 47 TWEED TERRACE
City, State Zip: SAN RAFAEL, CA 94901

Phone: (415) 721-2000 Fax: (415) 454-3535

Record ID: 210030DP
Service Type: RES-DETOX
Resident Capacity: 6

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: BAYSIDE MARIN

Legal Name: BAYSIDE MARIN, INC.
Address: 168 BAYVIEW DRIVE
City, State Zip: SAN RAFAEL, CA 94901

Phone: (415) 721-2000 Fax: (415) 454-3535

Record ID: 210030EP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: BAYSIDE MARIN IV
Legal Name: BAYSIDE MARIN, INC.
Address: 180 BAYVIEW DRIVE
City, State Zip: SAN RAFAEL, CA 94901

Phone: (415) 721-2000 Fax: (415) 454-3535

Record ID: 210030FP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: MARIN OUTPATIENT AND RECOVERY SERVICES

Legal Name: MARIN SERVICES FOR MEN
Address: 710 C STREET, SUITE 7A & 8

City, State Zip: SAN RAFAEL, CA 94901

Phone: (415) 485-6736 Fax: (415) 236-1830

Record ID: 210033AN

Service Type: NON Target Population: 1.2

Expiration Date: 1/31/2020 IMS: No

Program Name: NORTH BAY RECOVERY CENTER

Legal Name: NORTH BAY RECOVERY CENTER, LLC.

Address: 55 SHAVER STREET,

SUITES 200 AND 300 SAN RAFAEL, CA 94901

City, State Zip: SAN RAFAEL, CA 94901 Phone: (415) 454-4357 Fax: (415) 454-4329

Record ID: 210037AP
Service Type: NON
Target Population: 1.2

Expiration Date: 10/31/2019 IMS: No

Program Name: REFLECTIONS

Legal Name: LIVING AT REFLECTIONS, LLC

Address: 1191 SIMMONS LANE City, State Zip: NOVATO, CA 94945 Phone: (415) 895-6146

Record ID: 210038AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: REFLECTIONS

Legal Name: LIVING AT REFLECTIONS, LLC

Address: 10 LOCKTON LANE
City, State Zip: NOVATO, CA 94945
Phone: (415) 891-8000

Record ID: 210038BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: HUCKLEBERRY YOUTH PROGRAMS

Legal Name: HUCKLEBERRY YOUTH PROGRAMS, INC.

Address: 361 THIRD STREET, SUITE G City, State Zip: SAN RAFAEL, CA 94901

Phone: (415) 258-4944
Record ID: 210039AN

Service Type: NON
Target Population: 1.5

Expiration Date: 10/31/2018 IMS: No

Program Name: ALTA MIRA RECOVERY PROGRAMS

Legal Name: ALTA MIRA RECOVERY CENTERS, LLC

Address: 125 BULKLEY AVENUE City, State Zip: SAUSALITO, CA 94965

Phone: (415) 332-1350 Fax: (415) 275-7201

Record ID: 210040AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: ALTA MIRA RECOVERY PROGRAMS

Legal Name: ALTA MIRA RECOVERY CENTERS, LLC

Address: 135 BULKLEY AVENUE City, State Zip: SAUSALITO, CA 94965

Phone: (415) 332-1350 Fax: (415) 275-7201

Record ID: 210040BP Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: ALTA MIRA RECOVERY PROGRAMS
Legal Name: ALTA MIRA RECOVERY CENTERS, LLC

Address: 25 SANTA ROSA

City, State Zip: SAUSALITO, CA 94965

Phone: (415) 332-1350 Fax: (415) 339-6084

Record ID: 210040CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: ALTA MIRA RECOVERY PROGRAMS
Legal Name: ALTA MIRA RECOVERY CENTERS, LLC

Address: 110 HARRISON AVENUE City, State Zip: SAUSALITO, CA 94965

Phone: (415) 332-1350 Fax: (415) 275-7201

Record ID: 210040DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: ALTA MIRA RECOVERY PROGRAMS

Legal Name: ALTA MIRA RECOVERY CENTERS, LLC

Address: 126 HARRISON AVENUE City, State Zip: SAUSALTO, CA 94965

Phone: (415) 332-1350 Fax: (415) 275-7201

Record ID: 210040EP

Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: ALTA MIRA OUTPATIENT SERVICES

Legal Name: ALTA MIRA RECOVERY CENTERS, LLC
Address: 591 REDWOOD HIGHWAY, SUITE 5220

City, State Zip: MILL VALLEY, CA 94941

Phone: (415) 339-6084 Fax: (415) 520-2404

Record ID: 210040FP

Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: MARIN TREATMENT CENTER
Legal Name: MARIN TREATMENT CENTER
Address: 1466 LINCOLN AVENUE
City, State Zip: SAN RAFAEL, CA 94901

Phone: (415) 457-3755 Fax: (415) 457-9516

Record ID: 210042AN

Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: MUIR WOOD ADOLESCENT & FAMILY SERVICES

Legal Name: MUIR WOOD, LLC Address: 938 B STREET

City, State Zip: SAN RAFAEL, CA 94901

Phone: (310) 903-1155 Fax: (707) 559-5401

Record ID: 210044AP

Service Type: NON Target Population: 1.5

Expiration Date: 10/31/2017 IMS: No

Program Name: SAFE PASSAGE RECOVERY Legal Name: SAFE PASSAGE RECOVERY LLC Address: 863 FRANCISCO BLVD EAST

SUITE A

City, State Zip: SAN RAFAEL, CA 94903

Phone: (415) 578-2069 Fax: (415) 578-2823

Record ID: 210046AP NON-DETOX Service Type:

Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: FULL CIRCLE RECOVERY CENTER

Legal Name: FULL CIRCLE ADDICTION AND RECOVERY SERVICES LLC

Address: 1104 LINCOLN AVENUE City, State Zip: SAN RAFAEL, CA 94901

Phone: (415) 202-6255

Record ID: 210048AP Service Type: NON Target Population: 1.8

Expiration Date: 3/31/2019 IMS: No

Program Name: AVERY LANE, LLC Legal Name: AVERY LANE, LLC

Address: 505A SAN MARIN DRIVE, SUITE 300

City, State Zip: NOVATO, CA 94945 Phone: (415) 686-6127

210049AP Record ID: NON-DETOX Service Type: Target Population: 1.3

Expiration Date: 1/31/2019

IMS: No

SUNNY HILLS SERVICES Program Name: Legal Name: SUNNY HILLS SERVICES

Address: 300 SUNNY HILLS DRIVE, BLDG. 3

City, State Zip: SAN ANSELMO, CA 94960

(415) 457-3200 Fax: (415) 456-4679 Phone:

210050AN Record ID: Service Type: DSS

Target Population: 1.5

6/30/2019 Expiration Date:

IMS: No

As of 11/1/2017

Mariposa County

Program Name: MARIPOSA COUNTY BEHAVIORAL HEALTH AND RECOVERY SERVICES
Legal Name: MARIPOSA COUNTY BEHAVIORAL HEALTH AND RECOVERY SERVICES
Address: 5362 LEMEE LANE

City, State Zip: MARIPOSA, CA 95338

Phone: (209) 966-2000 Fax: (209) 742-0996

Record ID: 220002AN

Service Type: NON Target Population: 1.1
Expiration Date: 7/31/2019

IMS: No

As of 11/1/2017

Mendocino County

Program Name: UKIAH RECOVERY CENTER

Legal Name: FORD STREET PROJECT

Address: 201 BRUSH STREET, BUILDINGS 201A, 201B, AND 201C

UKIAH, CA 95482 City, State Zip: Phone: (707) 462-1934 Record ID: 230004AN

Resident Capacity: 40 Total Occupancy: 40

Service Type:

Target Population: 1.1

6/30/2019 Expiration Date: IMS: No

RES-DETOX

FORD STREET PROJECT Program Name: Legal Name: FORD STREET PROJECT Address: 139 FORD STREET City, State Zip: UKIAH, CA 95482

(707) 468-9860 Phone: (707) 462-1934 Fax:

Record ID: 230004BN

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY, Program Name:

ALCOHOL AND OTHER DRUG PROGRA

MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY Legal Name:

790 SOUTH FRANKLIN STREET, SUITE B Address:

City, State Zip: FORT BRAGG, CA 95437

Phone: (707) 472-2605 Fax: (707) 472-2605

Record ID: 230006GN Service Type: NON

Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY Program Name:

BEHAVIORIAL HEALTH & RECOVERY

Legal Name: MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY Address: 1120 SOUTH DORA STREET

UKIAH, CA 95482 City, State Zip:

Phone: (707) 472-2637 Fax: (707) 472-2768

Record ID: 230006HN Service Type: NON Target Population: 1.1

Expiration Date: IMS: 10/31/2019 No

MENDOCINO COUNTY HHSA - CHILDREN'S AND FAMILY SERVICES Program Name:

Legal Name: MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY

Address: 727 S. STATE STREET City, State Zip: UKIAH, CA 95482

Phone: (707) 472-2605 (707) 472-2657 Fax:

Record ID: 230006KN Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

WILLITS INTEGRATED SERVICES CENTER (WISC) Program Name:

Legal Name: MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY

Address: 474 E. VALLEY STREET City, State Zip:

WILLITS, CA 95490

Phone: (707) 472-2605 (707) 472-2657 Fax:

Record ID: 230006LN Service Type: NON

Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

As of 11/1/2017

Merced County

Program Name: DAVE RIORDAN'S 'HOBIE HOUSE'

Legal Name: COMMUNITY/SOCIAL MODEL ADVOCATES, INC.

Address: 1299 AND 1301 YOSEMITE PARKWAY, 1931 AND 1941 HIGHLAND AVENUE

City, State Zip: MERCED, CA 95340 Phone: (209) 722-6335

Record ID: 240001BN
Service Type: RES
Resident Capacity: 25
Total Occupancy: 26
Target Population: 1.2

Expiration Date: 8/31/2018 IMS: No

Program Name: THE ROSE JULIA RIORDAN TRANQUILITY VILLAGE

Legal Name: COMMUNITY/SOCIAL MODEL ADVOCATES, INC.

Address: 509/519, 527/537, 559, 569, 579 AND 589 MENDOCINO COURT

City, State Zip: ATWATER, CA 95301

Phone: (209) 357-5261 Fax: (209) 357-5279

Record ID: 240001EN

Service Type: RES
Resident Capacity: 42
Total Occupancy: 60
Target Population: 1.4

Expiration Date: 11/30/2018 IMS: No

Program Name: RECOVERY ASSISTANCE FOR TEENS (R.A.F.T.)

Legal Name: MERCED COUNTY DEPARTMENT OF MENTAL HEALTH - ALCOHOL AND DRUG SERVICES

Address: 3313 NORTH G STREET, SUITE B

City, State Zip: MERCED, CA 95340

Phone: (209) 381-6808 Fax: (209) 725-3810

Record ID: 240003AN

Service Type: NON Target Population: 1.5

Expiration Date: 7/31/2019 IMS: No

Program Name: THE CENTER

Legal Name: MERCED COUNTY DEPARTMENT OF MENTAL HEALTH - ALCOHOL AND DRUG SERVICES

Address: 3305 G STREET City, State Zip: MERCED, CA 95340

Phone: (209) 381-6880 Fax: (209) 723-6220

Record ID: 240003BN
Service Type: NON
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: MERCED COUNTY SACPA DRUG TREATMENT PROGRAM

Legal Name: MERCED COUNTY DEPARTMENT OF MENTAL HEALTH-ALCOHOL AND DRUG SERVICES

Address: 676 LOUHBOROUGH DRIVE City, State Zip: MERCED, CA 95348-2601

Phone: (209) 381-6852 Fax: (209) 385-3174

Record ID: 240003CN
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

As of 11/1/2017 Modoc County

No licensed or certified facilities at this time.

Please check with a neighboring county for services.

As of 11/1/2017 Mono County

No licensed or certified facilities at this time.

Please check with a neighboring county for services.

As of 11/1/2017

Monterey County

Program Name: BEACON HOUSE
Legal Name: BEACON HOUSE
Address: 468 PINE AVENUE

City, State Zip: PACIFIC GROVE, CA 93950

Phone: (831) 372-2334

Record ID: 270001AN Service Type: RES-DETOX

Resident Capacity: 22 Total Occupancy: 22 Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: DOOR TO HOPE
Legal Name: DOOR TO HOPE
Address: 165 CLAY STREET
City, State Zip: SALINAS, CA 93901

Phone: (831) 422-6226 Fax: (831) 758-5127

Record ID: 270002AN

Service Type: RES
Resident Capacity: 14
Total Occupancy: 14
Target Population: 1.3

Expiration Date: 3/31/2018 IMS: No

Program Name: NUEVA ESPERANZA
Legal Name: DOOR TO HOPE

Address: 325 CALIFORNIA STREET City, State Zip: SALINAS, CA 93901

Phone: (831) 422-2636 Fax: (831) 758-5127

Record ID: 270002BN

Service Type: RES
Resident Capacity: 6
Total Occupancy: 16
Target Population: 1.3

Expiration Date: 3/31/2018 IMS: No

Program Name: DOOR TO HOPE
Legal Name: DOOR TO HOPE

Address: 130 WEST GABILAN STREET

City, State Zip: SALINAS, CA 93901

Phone: (831) 758-0181 Fax: (831) 758-5127

Record ID: 270002CN
Service Type: NON

Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: SUN STREET CENTERS, MEN'S RESIDENTIAL

Legal Name:
Address:
SUN STREET CENTERS
SUN STREET
City, State Zip:
Phone:
(831) 753-5145
Record ID:
270003AN

Service Type: RES
Resident Capacity: 54
Total Occupancy: 54
Target Population: 1.2

Expiration Date: 11/30/2017 IMS: No

Program Name: SUN STREET CENTERS OUTPATIENT PROGRAM

Legal Name: SUN STREET CENTERS Address: 12 SUN STREET City, State Zip: SALINAS, CA 93901

Phone: (831) 753-6001 Fax: (831) 753-5169

Record ID: 270003BN Service Type: NON

Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: GENESIS RESIDENTIAL CENTER
Legal Name: COMMUNITY HUMAN SERVICES

Address: 1140, 1146, AND 1152 SONOMA AVENUE

City, State Zip: SEASIDE, CA 93955

Phone: (831) 899-2436 Fax: (831) 658-3815

Record ID: 270004AN

Service Type: RES
Resident Capacity: 36
Total Occupancy: 42
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: VALLEY HEALTH ASSOCIATES
Legal Name: VALLEY HEALTH ASSOCIATES
Address: 338 MONTEREY STREET
City, State Zip: SALINAS, CA 93901

Phone: (831) 424-6655 Fax: (831) 424-9717

Record ID: 270011AN

Service Type: NON

Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: MONTEREY INSTITUTE OF MENTAL HEALTH

Legal Name: MONTEREY INSTITUTE LICENSED CLINICAL SOCIAL WORKER, INC.

Address: 398 FOAM STREET, SUITE 200

City, State Zip: MONTEREY, CA 93940 Phone: (831) 747-1727

Record ID: 270012AP
Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

State of California, Department of Health Care Services Licensed Residential Facilities and/or Certified Alcohol and Drug Programs

As of 11/1/2017

Napa County

Program Name: NAPA COUNTY ALCOHOL AND DRUG PROGRAMS NAPA COUNTY HEALTH AND HUMAN SERVICES Legal Name:

Address: 2751 NAPA VALLEY CORPORATE DRIVE

BUILDINGS A & B NAPA, CA 94558 City, State Zip: Phone: (707) 253-4721

Record ID: 280003BN

Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: Legal Name: ALTERNATIVES FOR BETTER LIVING Legal Name: ALTERNATIVES FOR BETTER LIVING

Address: 701 SCHOOL STREET City, State Zip: NAPA, CA 94559-2829

Phone: (707) 226-1248 Fax: (707) 226-8011

Record ID: 280010AN Service Type: NON

Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: ALDEA BEHAVIORAL HEALTH SERVICES

Legal Name: ALDEA, INC. Address: 2310 1ST STREET City, State Zip: NAPA, CA 94559

Phone: (707) 255-1855 Fax: (707) 255-5621

Record ID: 280013BN

Service Type: NON Target Population: 1.5

Expiration Date: 4/30/2019 IMS: No

Program Name: COLD SPRINGS

Legal Name: PACIFICA PAIN MANAGEMENT SERVICES, INC.

Address: 415 COLD SPRINGS ROAD

City, State Zip: ANGWIN, CA 94508-9657

Phone: (707) 963-1493 Fax: (707) 963-1463

Record ID: 280015AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 7 Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

MCALISTER INSTITUTE RESIDENTIAL PROGRAM Program Name:

Legal Name: Address: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

2100 NAPA VALLEJO HIGHWAY, BLDG. 253 (M-1)

City, State Zip: NAPA, CA 94558-6293

(707) 257-1460 Fax: (619) 442-1101 Phone:

Record ID: 280017AN Service Type: RES-DETOX

Resident Capacity: 55 Total Occupancy: 61 Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: DUFFY'S MYRTLEDALE
Legal Name: DUFFY'S NAPA VALLEY REHAB, LLC
Address: 3058, 3076 & 3088 MYRTLEDALE RO 3058, 3076 & 3088 MYRTLEDALE ROAD

City, State Zip: CALISTOGA, CA 94515

(707) 942-6888 Fax: (707) 942-4819 Phone:

Record ID: 280019AP
Service Type: RES-DETOX

Resident Capacity: 61 Total Occupancy: 61
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: DUFFY'S NAPA VALLEY
Legal Name: DUFFY'S NAPA VALLEY REHAB, LLC
Address: 2436 FOOTHILL BOULEVARD, SUITE 2436 FOOTHILL BOULEVARD, SUITE E

City, State Zip: CALISTOGA, CA 94515

Phone: (707) 942-6888 Fax: (707) 942-4819

Record ID: 280019BP

Record ID: 280019BP
Service Type: NON
Target Population: 1.1
Expiration Date: 10/31/2017

IMS:

State of California, Department of Health Care Services Licensed Residential Facilities and/or Certified Alcohol and Drug Programs

As of 11/1/2017

Nevada County

Program Name: Legal Name: Address: GRASS VALLEY SERVICE CENTER COMMUNITY RECOVERY RESOURCES 180 SIERRA COLLEGE DRIVE City, State Zip: GRASS VALLEY, CA 95945-5768

Phone: (530) 273-9541 Fax: (530) 273-7740

Record ID: 290002AN

Service Type: NON Target Population: 1.1

6/30/2018 Expiration Date: IMS: No

Program Name: HOPE HOUSE/SERENITY HOUSE
Legal Name: COMMUNITY RECOVERY RESOURCE
Address: 159 BRENTWOOD DRIVE COMMUNITY RECOVERY RESOURCES

City, State Zip: GRASS VALLEY, CA 95945-5768

Phone: (530) 271-1141 Fax: (530) 271-7036

290002BN Record ID: Service Type: RES-DETOX

Resident Capacity: 40 Total Occupancy: 52 Target Population: 1.9

Expiration Date: 1/31/2019 IMS: No

TRUCKEE SERVICE CENTER

Program Name: Legal Name: Address: COMMUNITY RECOVERY RESOURCES 10015 PALISADES DRIVE, SUITE 1

City, State Zip: TRUCKEE, CA 96161-1941

Phone: (530) 587-8194 Fax: (530) 587-5617

Record ID: 290002DN Service Type: NON

Target Population: 1.10

Expiration Date: 6/30/2018 IMS: No

State of California, Department of Health Care Services Licensed Residential Facilities and/or Certified Alcohol and Drug Programs

As of 11/1/2017

Orange County

Program Name: MARIPOSA WOMEN AND FAMILY CENTER Legal Name: MARIPOSA WOMEN AND FAMILY CENTER Address: 812 W. TOWN AND COUNTRY ROAD

City, State Zip: ORANGE, CA 92868 Phone: (714) 547-6494

Record ID: 300005AN Service Type: NON Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: Legal Name: Address: MARIPOSA WOMEN AND FAMILY CENTER MARIPOSA WOMEN AND FAMILY CENTER 29222 RANCHO VIEJO ROAD, #122 City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (714) 547-6494 Fax: (714) 547-6464

Record ID: 300005BN

Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

ADULT AND OLDER ADULT BEHAVIORAL HEALTH- SANTA ANA SUBSTANCE USE DISORDERS

Program Name: Legal Name: Address: COUNTY OF ORANGE HEALTH CARE AGENCY

1200 NORTH MAIN STREET, SUITES 100B AND 301

City, State Zip: SANTA ANA, CA 92701

Phone: (714) 834-2860 Fax: (714) 568-4933

Record ID: 300006BN

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

ADULT AND OLDER ADULT BEHAVIORAL HEALTH- WESTMINSTER SUBSTANCE USE DISORDERS

Program Name: Legal Name: Address: COUNTY OF ORANGE HEALTH CARE AGENCY 14140 BEACH BOULEVARD, ROOM 120 AND 200

City, State Zip: WESTMINSTER, CA 92683

Phone: (714) 834-2160 Record ID: 300006DN

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

ADULT AND OLDER ADULT BEHAVIORAL HEALTH -Program Name:

ALISO VIEJO SUBSTANCE USE DISORDERS

Legal Name: COUNTY OF ORANGE HEALTH CARE AGENCY

Address: 5 MAREBLU, SUITES 100 AND 200

City, State Zip: ALISO VIEJO, CA 92656 Phone: (714) 834-2160

Record ID: 300006GN

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: ADULT AND OLDER ADULT BEHAVIORAL HEALTH - COSTA MESA SUBSTANCE USE DISORDERS

COUNTY OF ORANGE HEALTH CARE AGENCY

Legal Name: Address: 3115 REDHILL AVENUE City, State Zip: COSTA MESA, CA 92626

Phone: (714) 834-2160 300006IN

Record ID: Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No Program Name: ADULT AND OLDER ADULT BEHAVIORAL HEALTH - ANAHEIM SUBSTANCE USE DISORDERS

Legal Name: COUNTY OF ORANGE HEALTH CARE AGENCY Address: 2035 BALL ROAD, SUITES 100A AND 100P

City, State Zip: ANAHEIM, CA 92805

Phone: (714) 517-6140 Fax: (714) 517-6169

Record ID: 300006LN
Service Type: NON
Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: NEW DIRECTIONS FOR WOMEN/PROGRAM FOR WOMEN WITH CHILDREN

Legal Name: NEW DIRECTIONS FOR WOMEN, INC.

Address: 334 UNIVERSITY AVENUE City, State Zip: COSTA MESA, CA 92627

Phone: (949) 313-1192 Fax: (949) 269-9233

Record ID: 300007FN

Service Type: RES
Resident Capacity: 6
Total Occupancy: 12
Target Population: 1.4

Expiration Date: 10/31/2017 IMS: No

Program Name: NEW DIRECTIONS FOR WOMEN, INC. Legal Name: NEW DIRECTIONS FOR WOMEN, INC.

Address: 2601 AND 2607 WILLO LANE City, State Zip: COSTA MESA, CA 92627

Phone: (949) 313-1192

Record ID: 300007GN
Service Type: RES
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.3

Expiration Date: 11/30/2017 IMS: No

Program Name: NEW DIRECTIONS FOR WOMEN OUTPATIENT PROGRAM

Legal Name: NEW DIRECTIONS FOR WOMEN, INC.

Address: 3001 REDHILL AVENUE, BUILDING 4, SUITES 108 AND 109

City, State Zip: COSTA MESA, CA 92626

Phone: (949) 313-1192

Record ID: 300007JN
Service Type: NON
Target Population: 1.3

Expiration Date: 2/28/2018 IMS: No

Program Name: NEW DIRECTIONS FOR WOMEN

Legal Name: NEW DIRECTIONS FOR WOMEN, INC.

Address: 2614 WILLO LANE

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 313-1192 Fax: (949) 269-9233

Record ID: 300007KN

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 7/31/2018 IMS: No

Program Name: NEW DIRECTIONS FOR WOMEN

Legal Name: NEW DIRECTIONS FOR WOMEN, INC.

Address: 2603 WILLO LANE

City, State Zip: COSTA MESA, CA 92627 Phone: (949) 313-1192

Record ID: 300007LN

Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 3/31/2019 IMS: No

Program Name: CASA ELENA RECOVERY HOME

Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.

Address: 832 SOUTH ANAHEIM BOULEVARD

City, State Zip: ANAHEIM, CA 92801 Phone: (714) 772-5580

Record ID: 300010BN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 7/31/2018 IMS: No

Program Name: LA FAMILIA ALCOHOL AND DRUG SERVICES

Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.

Address: 1905 NORTH COLLEGE AVENUE, SUITE M

City, State Zip: SANTA ANA, CA 92701

Phone: (714) 479-0120 Fax: (714) 479-0153

Record ID: 300010DN
Service Type: NON
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: SOUTH COAST COUNSELING, INC. Legal Name: SOUTH COAST COUNSELING, INC.

Address: 693 PLUMER STREET

City, State Zip: COSTA MESA, CA 92627-2720

Phone: (949) 642-0180

Record ID: 300012BN
Service Type: RES
Resident Capacity: 15
Total Occupancy: 15
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: HILLSIDE MISSION LLC
Legal Name: HILLSIDE MISSION LLC

Address: 23371 ROCKROSE

City, State Zip: MISSION VIEJO, CA 92692

Phone: (949) 293-9094 Fax: (949) 472-3688

Record ID: 300014AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: ROQUE CENTER

Legal Name: ROQUE CENTER, INC.
Address: 10936 DALE AVENUE
City, State Zip: STANTON, CA 90680
Phone: (714) 952-4032

Record ID: 300015AN Service Type: RES-DETOX

Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: THE VILLA

Legal Name: THE VILLA CENTER, INC.
Address: 910 NORTH FRENCH STREET
City, State Zip: SANTA ANA, CA 92701

Phone: (714) 547-3301 Fax: (714) 547-1249

Record ID: 300016AN

Service Type: RES
Resident Capacity: 15
Total Occupancy: 16
Target Population: 1.3

Expiration Date: 1/31/2018 IMS: No

Program Name: THE VILLA ANNEX

Legal Name: THE VILLA CENTER, INC.
Address: 311 EAST WASHINGTON STREET

City, State Zip: SANTA ANA, CA 92701

Phone: (714) 547-2732 Fax: (714) 547-1249

Record ID: 300016CN
Service Type: RES

Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.3

Expiration Date: 1/31/2018 IMS: No

Program Name:THE VILLA ANNEX IILegal Name:THE VILLA CENTER, INC.Address:519 EAST WASHINGTON AVENUE

City, State Zip: SANTA ANA, CA 92701

Phone: (714) 547-3301 Fax: (714) 547-1249

Record ID: 300016DN

Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.3

Expiration Date: 5/31/2018 IMS: No

Program Name: CORNERSTONE 1

Legal Name: RECOVERY HOMES OF AMERICA, INC.

Address: 13682 YORBA STREET
City, State Zip: TUSTIN, CA 92780-1831

Phone: (714) 730-5399

Record ID: 300017AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: CORNERSTONE OF SOUTHERN CALIFORNIA 3

Legal Name: RECOVERY HOMES OF AMERICA, INC.

Address: 427 SOUTH YORBA STREET

City, State Zip: ORANGE, CA 92869 Phone: (714) 730-5399

Record ID: 300017BP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: CORNERSTONE OF SOUTHERN CALIFORNIA 7

Legal Name: RECOVERY HOMES OF AMERICA, INC.

Address: 13681 ROSALIND STREET City, State Zip: TUSTIN, CA 92780

Phone: (714) 730-5399 Fax: (714) 710-7100

Record ID: 300017CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.3

Expiration Date: 5/31/2018 IMS: No

Program Name: CORNERSTONE OF SOUTHERN CALIFORNIA 4

Legal Name: RECOVERY HOMES OF AMERICA, INC.

Address: 13671 ROSALIND STREET City, State Zip: TUSTIN, CA 92780-1831

Phone: (714) 730-5399 Fax: (714) 710-7100

Record ID: 300017DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: Yes

Program Name: CORNERSTONE OF SOUTHERN CALIFORNIA OUTPATIENT SERVICES

Legal Name: RECOVERY HOMES OF AMERICA, INC. Address: 1950 EAST 17TH STREET, SUITE 150

City, State Zip: SANTA ANA, CA 92705 Phone: (714) 547-4300

Record ID: 300017FP
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: CORNERSTONE #2

Legal Name: RECOVERY HOMES OF AMERICA, INC.

Address: 13022 YORBA STREET City, State Zip: SANTA ANA, CA 92705

Phone: (714) 730-5399 Fax: (714) 730-3505

Record ID: 300017GP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: CORNERSTONE RECOVERY HOME #5

Legal Name: RECOVERY HOMES OF AMERICA, INC.

Address: 2641 OLD GRAND

City, State Zip: SANTA ANA, CA 92701

Phone: (714) 730-5399 Fax: (714) 730-3505

Record ID: 300017HP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: CORNERSTONE RECOVERY HOME #6

Legal Name: RECOVERY HOMES OF AMERICA, INC.

Address: 13861 ESPLANADE AVENUE City, State Zip: SANTA ANA, CA 92705 Phone: (714) 547-4300

Record ID: 300017IP
Service Type: RES
Resident Capacity: 6

Total Occupancy: 7
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: CORNERSTONE RECOVERY HOME #9

Legal Name: RECOVERY HOMES OF AMERICA, INC. Address: 2217 NORTH WRIGHT STREET

City, State Zip: SANTA ANA, CA 92780

Phone: (714) 730-5399 Fax: (714) 730-3505

Record ID: 300017JP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: CORNERSTONE RECOVERY HOME Y-11

Legal Name: RECOVERY HOMES OF AMERICA, INC. Address: 880 S. YORBA STREET

City, State Zip: ORANGE, CA 92869-5052

Phone: (714) 730-5399 Fax: (714) 730-3505

Record ID: 300017KP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 10
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: CORNERSTONE RECOVERY HOME M-10
Legal Name: RECOVERY HOMES OF AMERICA, INC.

Address: 3310 E. MAPLE AVENUE
City, State Zip: ORANGE, CA 92869
Phone: (714) 730-5399

Record ID: 300017LP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 9
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: CORNERSTONE RECOVERY HOME - HOUSE 12

Legal Name: RECOVERY HOMES OF AMERICA, INC.

Address: 581 SOUTH PROSPECT STREET

City, State Zip: ORANGE, CA 92869 Phone: (714) 730-5399

Record ID: 300017NP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.2

Expiration Date: 3/31/2018 IMS: No

Program Name: CORNERSTONE OF SOUTHERN CALIFORNIA 8

Legal Name: RECOVERY HOMES OF AMERICA, INC.

Address: 13672 YORBA STREET
City, State Zip: TUSTIN, CA 92780
Phone: (714) 730-5399

Record ID: 3000170P Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: CORNERSTONE RECOVERY HOME #14
Legal Name: RECOVERY HOMES OF AMERICA, INC.

Address: 1612 EAST FRUIT STREET City, State Zip: SANTA ANA, CA 92701

Phone: (714) 730-5399 Fax: (714) 730-3505

Record ID: 300017PP
Service Type: RES

Resident Capacity: 6
Total Occupancy: 10
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: CORNERSTONE RECOVERY HOME 15
Legal Name: RECOVERY HOMES OF AMERICA, INC.

Address: 700 SOUTH YORBA STREET

City, State Zip: ORANGE, CA 92869

Phone: (714) 730-5399 Fax: (714) 730-3505

Record ID: 300017SP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: CORNERSTONE RECOVERY HOME 16
Legal Name: RECOVERY HOMES OF AMERICA, INC.

Address: 235 SOUTH PROSPECT City, State Zip: ORANGE, CA 92869

Phone: (714) 730-5399 Fax: (714) 730-5399

Record ID: 300017TP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.3

Expiration Date: 8/31/2018 IMS: No

CORNERSTONE RECOVERY HOME 17 Program Name: Legal Name: RECOVERY HOMES OF AMERICA, INC.

Address: 225 SOUTH PROSPECT City, State Zip: ORANGE, CA 92869

Phone: (714) 730-5399 Fax: (714) 730-3505

Record ID: 300017UP Service Type: RES Resident Capacity: 6 8 Total Occupancy: Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: CORNERSTONE RECOVERY HOME #18 Legal Name: RECOVERY HOMES OF AMERICA, INC.

Address: 757 SOUTH YORBA STREET

City, State Zip: ORANGE, CA 92869

(714) 730-5399 (714) 730-3505 Phone: Fax:

Record ID: 300017VP Service Type: RES Resident Capacity: 6 9 Total Occupancy:

Target Population: 1.1

8/31/2019 TMS: Expiration Date: No

Program Name: CORNERSTONE RECOVERY HOME #19 RECOVERY HOMES OF AMERICA, INC. Legal Name:

Address: 3735 EAST SPRING STREET

City, State Zip: ORANGE, CA 92869

Phone: (714) 730-5399 Fax: (714) 730-3505

Record ID: 300017WP Service Type: RES Resident Capacity: 6

Total Occupancy: 8 Target Population: 1.3

Expiration Date: 9/30/2018 IMS: No

CORNERSTONE RECOVERY HOME #20 Program Name: RECOVERY HOMES OF AMERICA, INC. Legal Name: Address: 249 SOUTH PROSPECT STREET

City, State Zip: ORANGE, CA 92869 Phone: (714) 730-5399

Record ID: 300017XP Service Type: RES Resident Capacity: 6 7 Total Occupancy: Target Population: 1.1

Expiration Date: 12/31/2019 IMS: No

Program Name: CORNERSTONE RECOVERY HOME #21

Legal Name: RECOVERY HOMES OF AMERICA, INC. Address: 591 SOUTH PROSPECT STREET

City, State Zip: ORANGE, CA 92869 Phone: (714) 730-5399

Record ID: 300017YP Service Type: RES Resident Capacity: 6 Total Occupancy: 8

Target Population: 1.1

Expiration Date: 12/31/2019 IMS:

Program Name: ONE NORTH RECOVERY, LLC Legal Name: ONE NORTH RECOVERY, LLC

Address: 34456 CALLE PORTOLA City, State Zip: CAPISTRANO BEACH, CA 92624-1054

Phone: (949) 481-7014

300018AP Record ID: Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 6/30/2019 IMS: Nο Program Name: COOPER FELLOWSHIP Legal Name: COOPER FELLOWSHIP, INC.

401, 405, 409, 413, 417, AND 421 NORTH COOPER STREET Address:

City, State Zip: SANTA ANA, CA 92703

Phone: (714) 554-1152 Fax: (714) 265-4870

Record ID: 300029AN Service Type: RES Resident Capacity: 60

Total Occupancy: 60 Target Population: 1.1

Expiration Date: 11/30/2017 IMS:

Program Name: PHOENIX HOUSE ORANGE COUNTY, INC. Legal Name: PHOENIX HOUSE ORANGE COUNTY, INC.

Address: 1207 EAST FRUIT STREET, BUILDINGS A, B2, B3, C, D, E & F

City, State Zip: SANTA ANA, CA 92701 Phone: (714) 953-9373

Record ID: 300033AN Service Type: RES Resident Capacity: 130 Total Occupancy: 130 Target Population: 1.1

8/31/2018 IMS: Expiration Date: No

Program Name: PHOENIX HOUSE ORANGE COUNTY

Legal Name: PHOENIX HOUSE ORANGE COUNTY, INC. Address: 1207 EAST FRUIT STREET, BUILDING B1

City, State Zip: SANTA ANA, CA 92701 Phone: (714) 953-9373

Record ID: 300033CN Service Type: NON Target Population: 1.1

9/30/2017 Expiration Date: IMS: No

Program Name: HOPE HOUSE

Legal Name: HOPE HOUSE CORPORATION

Address: 710 AND 714 N ANAHEIM BOULEVARD

City, State Zip: ANAHEIM, CA 92805

Phone: (714) 776-6090 Fax: (714) 776-8650

Record ID: 300034AN Service Type: RES Resident Capacity: 56 Total Occupancy: 56 Target Population: 1.1

11/30/2019 Expiration Date: TMS: No

SUBLIME WELLNESS CENTER Program Name: Legal Name: SURF CITY SOLUTIONS LLC Address: 1231 W. ST GERTRUDE PL. City, State Zip: SANTA ANA, CA 92707

(714) 375-6626 (866) 991-3182 Phone: Fax:

Record ID: 300035AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 7 Target Population: 1.1

9/30/2019 Expiration Date: IMS: No

Program Name: GERRY HOUSE

Legal Name: STRAIGHT TALK CLINIC, INCORPORATED Address: 1225 AND 1227 WEST 6TH STREET

City, State Zip: SANTA ANA, CA 92703

Phone: (714) 972-1402 Fax: (714) 972-1519

Record ID: 300040AN

Service Type: RES Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

9/30/2019 IMS: Expiration Date: No

WOODGLEN RECOVERY JUNCTION Program Name:

Legal Name: WOODGLEN RECOVERY JUNCTION INCORPORATED

771 WEST ORANGETHORPE AVENUE Address:

City, State Zip: FULLERTON, CA 92832

Phone: (714) 879-6916 Fax: (714) 578-2960

Record ID: 300042AN

Service Type: RES Resident Capacity: 24 Total Occupancy: 24 Target Population: 1.1

Expiration Date: 10/31/2019 IMS:

Program Name: WOODGLEN RECOVERY JUNCTION

Legal Name: WOODGLEN RECOVERY JUNCTION INCORPORATED

Address: 751 WEST ORANGETHORPE AVENUE

City, State Zip: FULLERTON, CA 92832

(714) 879-2741 Fax: (714) 578-2960 Phone:

Record ID: 300042BN Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

2/28/2018 TMS: Expiration Date: No

Program Name: DAYLIGHT AGAIN

WOODGLEN RECOVERY JUNCTION INCORPORATED Legal Name:

Address: 329 EAST COMMONWEALTH AVENUE

City, State Zip: FULLERTON, CA 92832

Phone: (714) 879-6916 Fax: (714) 578-2960

Record ID: 300042CN

Service Type: RES Resident Capacity: 16 Total Occupancy: 16 Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

WOODGLEN WEST DETOX Program Name:

Legal Name: WOODGLEN RECOVERY JUNCTION INCORPORATED

Address: 1401 WEST ORANGETHORPE AVE.

City, State Zip: FULLERTON, CA 92832

Phone: (714) 612-6956 Fax: (714) 578-2960

Record ID: 300042DN Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: SOBER LIVING BY THE SEA

Legal Name: SOBER LIVING BY THE SEA, INC.

Address: 4138 PATRICE ROAD

City, State Zip: NEWPORT BEACH, CA 92663

(949) 723-2829 Phone: (949) 673-6696 Fax:

Record ID: 300044ACP Service Type: RES-DETOX

Resident Capacity: 6 7 Total Occupancy: Target Population: 1.1

Expiration Date: 7/31/2018

Program Name: THE ROSE OF NEWPORT BEACH

Legal Name: SOBER LIVING BY THE SEA, INC.

Address: 6110 WEST OCEAN FRONT City, State Zip: NEWPORT BEACH, CA 92663

Phone: (949) 673-6696 Fax: (949) 675-4285

Record ID: 300044AFP

RES Service Type: Resident Capacity: 6 7 Total Occupancy: Target Population: 1.3

Expiration Date: 9/30/2019 IMS: Nο Program Name: THE LANDING AT NEWPORT BEACH
Legal Name: SOBER LIVING BY THE SEA, INC.

Address: 4711 SEASHORE DRIVE City, State Zip: NEWPORT BEACH, CA 92663

Phone: (949) 673-6696 Fax: (949) 675-4285

Record ID: 300044AGP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.2

Expiration Date: 9/30/2019 IMS: No

Program Name: THE ROSE OF NEWPORT BEACH
Legal Name: SOBER LIVING BY THE SEA, INC.

Address: 6111 SEASHORE DRIVE
City, State Zip: NEWPORT BEACH, CA 92663

Phone: (949) 673-6696 Fax: (949) 723-2829

Record ID: 300044SP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.3

Expiration Date: 7/31/2018 IMS: No

Program Name: HERITAGE HOUSE

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.

Address: 2212 A-D & 2218 A-D PLACENTIA AVENUE

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 646-2271

Record ID: 300054AN
Service Type: RES-DETOX

Resident Capacity: 16
Total Occupancy: 31
Target Population: 1.4

Expiration Date: 6/30/2018 IMS: No

Program Name: HERITAGE HOUSE NORTH

Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC. Address: 315, 319, AND 321 NORTH STATE COLLEGE BOULEVARD

City, State Zip: ANAHEIM, CA 92806-2925

Phone: (714) 687-0077 Fax: (714) 687-0691

Record ID: 300054IN
Service Type: RES
Resident Capacity: 21
Total Occupancy: 44
Target Population: 1.4

Expiration Date: 12/31/2018 IMS: No

Program Name: BREAKAWAY PROGRAM

Legal Name: BREAKAWAY HEALTH CORPORATION
Address: 3151 AIRWAY AVENUE, SUITE D-1

City, State Zip: COSTA MESA, CA 92626

Phone: (714) 847-7585 Fax: (714) 848-5410

Record ID: 300065AP

Service Type: NON Target Population: 1.5

Expiration Date: 1/31/2018 IMS: No

Program Name: THE RECOVERY CENTER

Legal Name: NANCY CLARK AND ASSOCIATES, INC.

Address: 1110 VICTORIA STREET City, State Zip: COSTA MESA, CA 92627

Phone: (949) 646-2340 Fax: (949) 631-4589

Record ID: 300067AP

Service Type: RES
Resident Capacity: 38
Total Occupancy: 41
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: RELAPSE PREVENTION OUTPATIENT PROGRAM

Legal Name: NANCY CLARK AND ASSOCIATES, INC. Address: 471 OLD NEWPORT ROAD, SUITE 101

City, State Zip: NEWPORT BEACH, CA 92663

Phone: (949) 631-0550 Fax: (949) 631-4589

Record ID: 300067BP
Service Type: NON
Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: TOUCHSTONES

Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.

Address: 525 NORTH PARKER City, State Zip: ORANGE, CA 92868 Phone: (714) 639-5546

Record ID: 300070AN
Service Type: DSS
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: COVENANT HILLS TREATMENT CENTERS

Legal Name: PACIFIC HILLS TREATMENT CENTERS, INC.

Address: 217 AND 219 AVENIDA MONTEREY

City, State Zip: SAN CLEMENTE, CA 92672

Phone: (949) 248-5335 Fax: (949) 248-4275

Record ID: 300074BP

Service Type: RES
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: COVENANT HILLS TREATMENT CENTERS, INC.

Legal Name: PACIFIC HILLS TREATMENT CENTERS, INC.

Address: 34248 VIA SANTA ROSA, APARTMENTS A, B, AND C

City, State Zip: CAPISTRANO BEACH, CA 92624

Phone: (949) 489-8121 Fax: (949) 369-7261

Record ID: 300074CP

Service Type: RES
Resident Capacity: 14
Total Occupancy: 14
Target Population: 1.3

Expiration Date: 11/30/2018 IMS: No

Program Name: COVENANT HILLS TREATMENT CENTERS.

Legal Name: PACIFIC HILLS TREATMENT CENTERS, INC.

Address: 27442 CALLE ARROYO, SUITE B City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 248-5335

Record ID: 300074DP
Service Type: NON
Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: SPENCER RECOVERY CENTER

Legal Name: SPENCER RECOVERY CENTERS, INC.

Address: 1316 SOUTH COAST HIGHWAY City, State Zip: LAGUNA BEACH, CA 92651

Phone: (949) 376-3705

Record ID: 300088AP
Service Type: RES
Resident Capacity: 28
Total Occupancy: 28
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: SPENCER RECOVERY CENTERS, INC. Legal Name: SPENCER RECOVERY CENTERS, INC. 1337 GAVIOTA, UNIT B AND C Address:

City, State Zip: LAGUNA BEACH, CA 92651

(949) 376-3705 Phone: Fax: (949) 376-6862

Record ID: 300088JP Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 11/30/2018 IMS:

Program Name: SPENCER RECOVERY CENTERS, INC. Legal Name: SPENCER RECOVERY CENTERS, INC. Address: 665 CAMINO DE LOS MARES, SUITE 104C

City, State Zip: SAN CLEMENTE, CA 92673

Phone: (949) 313-5224 (949) 313-5240 Fax:

Record ID: 300088LP Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

CHAPMAN HOUSE Program Name:

Legal Name: CHAPMAN HOUSE, INC.

Address: 1412 EAST CHAPMAN AVENUE

City, State Zip: ORANGE, CA 92866

Phone: (714) 288-9779 Fax: (714) 538-9779

Record ID: 300105BP Service Type: NON

Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

CHAPMAN HOUSE, INC. Program Name: Legal Name: CHAPMAN HOUSE, INC.

Address: 14511 - 14512 CARFAX DRIVE

City, State Zip: TUSTIN, CA 92780

Phone: (714) 288-9779 Fax: (714) 288-6130

300105IP Record ID: RES-DETOX Service Type: 44

Resident Capacity: Total Occupancy: 44 Target Population: 1.1

10/31/2019 IMS: Expiration Date: No

Program Name: COLLEGE COMMUNITY SERVICES/CALWORKS (CCS/CW)

Legal Name: COLLEGE COMMUNITY SERVICES

Address: 501 NORTH BROOKHURST STREET, SUITES 300B AND 320

City, State Zip: ANAHEIM, CA 92801

Phone: (714) 490-7711 Fax: (714) 490-7717

Record ID: 300106BP

Service Type: NON Target Population: 1.1

1/31/2019 Expiration Date: IMS: No

Program Name: COLLEGE COMMUNITY SERVICES/CALWORKS/CAMINO NUEVO

Legal Name: COLLEGE COMMUNITY SERVICES

1200 NORTH MAIN STREET, SUITE 630 Address:

SANTA ANA, CA 92701 City, State Zip:

Fax: Phone: (714) 824-8150 (714) 824-8151

Record ID: 300106CP

Service Type: NON Target Population: 1.1

5/31/2019 Expiration Date: IMS: No Program Name: KC SERVICES

Legal Name: KOREAN COMMUNITY SERVICES, INC. Address: 14795 JEFFREY ROAD, SUITE 207

City, State Zip: IRVINE, CA 92618 Phone: (949) 654-9163

Record ID: 300107CN
Service Type: NON
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: KC SERVICES

Legal Name: KOREAN COMMUNITY SERVICES, INC. Address: 1060 SOUTH BROOKHURST ROAD

City, State Zip: FULLERTON, CA 92833

Phone: (714) 449-1339 Fax: (714) 449-1289

Record ID: 300107DN
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: KC SERVICES

Legal Name: KOREAN COMMUNITY SERVICES, INC. Address: 7281 GARDEN GROVE BOULEVARD, SUITE H

City, State Zip: GARDEN GROVE, CA 92844

Phone: (714) 539-4544

Record ID: 300107EN
Service Type: NON
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: ABLE TO CHANGE RECOVERY, INC. Legal Name: ABLE TO CHANGE RECOVERY, INC.

Address: 28522 AVENIDA PLACIDA

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 493-6800 Fax: (949) 493-6832

Record ID: 300118AP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: ABLE TO CHANGE RECOVERY, INC. Legal Name: ABLE TO CHANGE RECOVERY, INC.

Address: 31501 RANCHO VIEJO ROAD, SUITE 101 & 103

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 493-6800 Fax: (949) 493-6832

Record ID: 300118BP

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name:ABLE TO CHANGE RECOVERY, INC.Legal Name:ABLE TO CHANGE RECOVERY, INC.

Address: 23492 WHITE DOVE AVENUE City, State Zip: LAKE FOREST, CA 92630

Phone: (949) 493-6800 Fax: (949) 493-6832

Record ID: 300118CP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: ABLE TO CHANGE RECOVERY, INC. Legal Name: ABLE TO CHANGE RECOVERY, INC.

Address: 32732 CAMARON

City, State Zip: DANA POINT, CA 92629

Phone: (949) 493-6800 Fax: (949) 493-6832

Record ID: 300118DP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: ABLE TO CHANGE RECOVERY, INC. Legal Name: ABLE TO CHANGE RECOVERY, INC.

Address: 30032 IMPERIAL DRIVE

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 493-6800 Fax: (949) 493-6832

Record ID: 300118EP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: CENTER FOR THE TREATMENT OF ADDICTION, INC.

Legal Name: THE CENTER FOR THE TREATMENT OF ADDICTION, INC.

Address: 2701 EAST CHAPMAN AVENUE, SUITE 111

City, State Zip: FULLERTON, CA 92831

Phone: (760) 722-0672 Fax: (760) 722-3418

Record ID: 300119HP
Service Type: NON
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: NEW BEGINNING FELLOWSHIP CENTER

Legal Name: THE NEW BEGINNING FELLOWSHIP CENTER

Address: 16581 BROOKHURST

City, State Zip: FOUNTAIN VALLEY, CA 92706

Phone: (714) 839-2515 Fax: (714) 839-5501

Record ID: 300120BN

Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: YELLOWSTONE, WROC

Legal Name: YELLOWSTONE WOMEN'S FIRST STEP HOUSE, INC.

Address: 3132 BOSTON WAY
City, State Zip: COSTA MESA, CA 92626

Phone: (888) 941-9048 Fax: (714) 646-5296

Record ID: 300121AN

Service Type: RES
Resident Capacity: 15
Total Occupancy: 15
Target Population: 1.2

Expiration Date: 3/31/2019 IMS: No

Program Name: YELLOWSTONE (WOMEN'S RECOVERY OF CALIFORNIA)

Legal Name: YELLOWSTONE WOMEN'S FIRST STEP HOUSE, INC.

Address: 154 & 160 EAST BAY STREET City, State Zip: COSTA MESA, CA 92627-2147

Phone: (949) 646-5296 Fax: (888) 941-9048

Record ID: 300121BN
Service Type: RES-DETOX

Resident Capacity: 12
Total Occupancy: 14
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: THE YELLOWSTONE BRIDGE

Legal Name: YELLOWSTONE WOMEN'S FIRST STEP HOUSE, INC.

Address: 2028 FULLERTON AVENUE,

UNITS A, B, AND C

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 574-3008 Fax: (949) 209-0369

Record ID: 300121FN
Service Type: RES-DETOX

Resident Capacity: 16 Total Occupancy: 20 Target Population: 1.2

Expiration Date: 8/31/2019 IMS: No

Program Name: THE CENTER

Legal Name: YELLOWSTONE WOMEN'S FIRST STEP HOUSE, INC.

Address: 2001 HARBOR BOULEVARD, SUITE 200

City, State Zip: COSTA MESA, CA 92626

Phone: (888) 418-4188 Fax: (949) 209-0369

Record ID: 300121IN
Service Type: NON
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: TWIN TOWN TREATMENT CENTERS - LOS ALAMITOS

Legal Name: TWIN TOWN CORPORATION
Address: 4388 EAST KATELLA AVENUE
City, State Zip: LOS ALAMITOS, CA 90720

Phone: (562) 594-8844 Fax: (562) 493-1280

Record ID: 300128AP
Service Type: NON

Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: TWIN TOWN TREATMENT CENTERS, ORANGE

Legal Name: TWIN TOWN CORPORATION

Address: 705 WEST LA VETA AVENUE, SUITE 208

City, State Zip: ORANGE, CA 92868

Phone: (714) 532-9295 Fax: (562) 493-1280

Record ID: 300128CP
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: TWIN TOWN TREATMENT CENTERS, MISSION VIEJO

Legal Name: TWIN TOWN CORPORATION

Address: 27281 LAS RAMBLAS STREET, SUITE 140

City, State Zip: MISSION VIEJO, CA 92691

Phone: (949) 540-0170 Fax: (562) 493-1280

Record ID: 300128DP Service Type: NON

Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: BODY MIND SPIRIT IOP

Legal Name: WILLIAM W. MARTIN, PH.D, LICENSED CLINICAL PSYCHOLOGIST,

A PROFESSIONAL COROPORATION

Address: 665 CAMINO DE LOS MARES, SUITE 104

City, State Zip: SAN CLEMENTE, CA 92673

Phone: (949) 248-7377 Fax: (866) 805-2796

Record ID: 300135AP

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: SOLUTIONS FOR RECOVERY

Legal Name: SOLUTIONS FOR RECOVERY, INC.

Address: 31931 PASEO TERRAZA

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 874-1332 Fax: (949) 429-2669

Record ID: 300143BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 2/29/2020 IMS: No

Program Name: SOLUTIONS BY THE SEA
Legal Name: OCEAN RECOVERY LLC

Address: 1601 WEST BALBOA BOULEVARD City, State Zip: NEWPORT BEACH, CA 92663

Phone: (949) 723-2388

Record ID: 300144AP
Service Type: RES
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.3

Expiration Date: 12/31/2018 IMS: No

Program Name: OCEAN RECOVERY 1115
Legal Name: OCEAN RECOVERY, L.L.C.
Address: 1115 WEST BALBOA BOULEVARD
City, State Zip: NEWPORT BEACH, CA 92661

Phone: (949) 675-3764 Fax: (949) 723-1288

Record ID: 300144BP
Service Type: RES
Resident Capacity: 22
Total Occupancy: 22
Target Population: 1.2

Expiration Date: 12/31/2018 IMS: No

Program Name: HOPE BY THE SEA, INC.
Legal Name: HOPE BY THE SEA, INC.

Address: 28371 VIA ANZAR

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 218-2690 Fax: (949) 218-1957

Record ID: 300149AP
Service Type: RES-DETOX
Resident Capacity: 6

Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name:HOPE BY THE SEA, INC.Legal Name:HOPE BY THE SEA, INC.Address:33171 PASEO CERVEZA

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 218-2690 Fax: (949) 218-1597

Record ID: 300149BP

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: HOPE BY THE SEA
Legal Name: HOPE BY THE SEA, INC.
Address: 31907 (B) DEL OBISPO

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 276-2691

Record ID: 300149CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name:HOPE BY THE SEALegal Name:HOPE BY THE SEA, INC.Address:31907 (A) DEL OBISPO

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 276-7518 **Record ID: 300149DP**Service Type: RES-DETOX

Resident Capacity: 5
Total Occupancy: 5
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: SEACLIFF RECOVERY CENTER

Legal Name: RIGHT NOW RECOVERY, LLC

Address: 18682 BEACH BOULEVARD, SUITE 255

City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (714) 960-0078

Record ID: 300152BP
Service Type: NON
Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC. Legal Name: SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC.

Address: 240 KNOX STREET

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 645-1026 Fax: (949) 645-1026

Record ID: 300154AP

Service Type: RES
Resident Capacity: 8
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC. Legal Name: SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC.

Address: 236 KNOX STREET

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 645-1026 Fax: (949) 645-1026

Record ID: 300154BP

Service Type: RES
Resident Capacity: 8
Total Occupancy: 8
Target Population: 1.3

Expiration Date: 2/28/2018 IMS: No

Program Name: SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC., 3

Legal Name: SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC.

Address: 930 MAGELLAN STREET City, State Zip: COSTA MESA, CA 92626

Phone: (949) 645-1026 Fax: (714) 242-6775

Record ID: 300154CP
Service Type: RES

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 10/31/2018 IMS: No

Program Name: SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC. Legal Name: SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC.

Address: 934 MAGELLAN STREET City, State Zip: COSTA MESA, CA 92626

Phone: (949) 645-1026 Fax: (714) 242-6775

Record ID: 300154DP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 8/31/2019 IMS: No

Program Name: SAFE HARBOR'S CHERISH DETOX

Legal Name: SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC.

Address: 22372 HARWICH LANE

City, State Zip: HUNTINGTON BEACH, CA 92646

Phone: (714) 785-2079 **Record ID: 300154FP**Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 10/31/2018 IMS: No

Program Name: SAFE HARBOR CONNECTIONS

Legal Name: SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC.

Address: 679 GOVERNOR STREET City, State Zip: COSTA MESA, CA 92627

Phone: (714) 785-2079 Fax: (714) 242-6775

Record ID: 300154GP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 7/31/2019 IMS: No

Program Name: SAFE HARBOR CONNECTIONS

Legal Name: SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC.

Address: 687 GOVERNOR STREET City, State Zip: COSTA MESA, CA 92627

Phone: (714) 785-2079 Fax: (714) 242-6775

Record ID: 300154HP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 7/31/2019 IMS: No

Program Name: SAFE HARBOR CONNECTIONS

Legal Name: SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC.

Address: 671 GOVERNOR STREET City, State Zip: COSTA MESA, CA 92627

Phone: (714) 785-2079 Fax: (714) 242-6775

Record ID: 300154IP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 7/31/2019 IMS: No

Program Name: SAFE HARBOR CONNECTIONS

Legal Name: SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC.

Address: 675 GOVERNOR STREET City, State Zip: COSTA MESA, CA 92627

Phone: (714) 785-2079 Fax: (714) 242-6775

Record ID: 300154JP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 7/31/2019 IMS: No

Program Name: WEL-MOR PSYCHOLOGY GROUP, INC.
Legal Name: WEL-MOR PSYCHOLOGY GROUP, INC.
Address: 2900 BRISTOL STREET, SUITE E 103

City, State Zip: COSTA MESA, CA 92626

Phone: (714) 540-9070 Fax: (714) 549-4525

Record ID: 300162AP

Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

WEL-MOR PSYCHOLOGY GROUP, INC. Program Name: Legal Name: WEL-MOR PSYCHOLOGY GROUP, INC. Address: 5130 EAST LA PALMA, SUITE 212

City, State Zip: ANAHEIM, CA 92807

Phone: (714) 540-9070 Fax: (714) 549-4525

Record ID: 300162BP Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2018 IMS:

Program Name: WEL-MOR PSYCHOLOGY GROUP, INC. Legal Name: WEL-MOR PSYCHOLOGY GROUP, INC. Address: 25401 CABOT ROAD, SUITE 114 City, State Zip: LAGUNA HILLS, CA 92653

Phone: (714) 540-9070 Fax: (714) 549-4525

Record ID: 300162CP Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

WEL-MOR PSYCHOLOGY GROUP, INC. Program Name: Legal Name: WEL-MOR PSYCHOLOGY GROUP, INC.

Address: 1440 NORTH HARBOR BOULEVARD, SUITE 725

City, State Zip: FULLERTON, CA 92835

Phone: (714) 540-9070 Fax: (714) 549-4525

Record ID: 300162DP Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

ORANGE COUNTY BAR FOUNDATION STOP SHORT OF ADDICTION Program Name:

Legal Name: ORANGE COUNTY BAR FOUNDATION, INC.

Address: 313 NORTH BIRCH, 2ND FLOOR

City, State Zip: SANTA ANA, CA 92701

Phone: (714) 480-1925 Fax: (714) 480-1933

Record ID: 300164AN

Service Type: NON Target Population: 1.1

2/28/2019 Expiration Date: TMS: No

BALBOA HORIZONS RECOVERY SERVICES Program Name: Legal Name: BALBOA HORIZONS RECOVERY SERVICES

Address: 1132 WEST BALBOA BOULEVARD City, State Zip: NEWPORT BEACH, CA 92661

Phone: (949) 675-3406 Fax: (949) 722-8125

Record ID: 300165AP

Service Type: RES Resident Capacity: 11 Total Occupancy: 11 Target Population: 1.3

5/31/2019 Expiration Date: IMS: No

Program Name: BALBOA HORIZONS RECOVERY SERVICES Legal Name: BALBOA HORIZONS RECOVERY SERVICES

2384 NEWPORT BOULEVARD Address: City, State Zip: COSTA MESA, CA 92627

Phone: (949) 515-4140 Fax: (949) 515-4150

Record ID: 300165BP

NON Service Type: Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: BALBOA HORIZONS RECOVERY SERVICES Legal Name: BALBOA HORIZONS RECOVERY SERVICES

Address: 129 CABRILLO STREET

City, State Zip: COSTA MESA, CA 92627-3053

Phone: (949) 515-4140 Fax: (949) 515-4150

Record ID: 300165EP Service Type: NON

Target Population: 1.1 Expiration Date: 4/30/2019

IMS: No

Address: 198 TULIP LANE,

UNITS C & D

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 791-2423
Record ID: 300165GP

Record ID: 3001
Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name:BALBOA HORIZONS RECOVERY SERVICES
Legal Name:
BALBOA HORIZONS RECOVERY SERVICES

Address: 192 TULIP LANE,

UNIT C

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 764-9145

Record ID: 300165HP
Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: BALBOA HORIZONS RECOVERY SERVICES
Legal Name: BALBOA HORIZONS RECOVERY SERVICES

Address: 192 TULIP LANE,

UNIT D

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 764-9153

Record ID: 300165IP

Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: BALBOA HORIZONS RECOVERY SERVICES
Legal Name: BALBOA HORIZONS RECOVERY SERVICES

Address: 2868 ROYAL PALM DRIVE,

UNITS A & B

City, State Zip: COSTA MESA, CA 92626

Phone: (714) 258-7865

Record ID: 300165JP
Service Type: RES-DETOX

Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: BALBOA HORIZONS RECOVERY SERVICES
Legal Name: BALBOA HORIZONS RECOVERY SERVICES

Address: 2868 ROYAL PALM DRIVE,

UNIT C

City, State Zip: COSTA MESA, CA 92626

Phone: (714) 556-1529

Record ID: 300165KP
Service Type: RES-DETOX

Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Address: 192 TULIP LANE,

UNIT B

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 764-9152

Record ID: 300165LP
Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: BALBOA HORIZONS RECOVERY SERVICES
Legal Name: BALBOA HORIZONS RECOVERY SERVICES

Address: 192 TULIP LANE

UNIT A

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 764-9140

Record ID: 300165MP
Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: BALBOA HORIZONS RECOVERY SERVICES
Legal Name: BALBOA HORIZONS RECOVERY SERVICES

Address: 198 TULIP LANE

A-B

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 764-9163

Record ID: 300165NP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: BALBOA HORIZONS RECOVERY SERVICES
Legal Name: BALBOA HORIZONS RECOVERY SERVICES

Address: 2864 ROYAL PALM DRIVE,

UNIT C

City, State Zip: COSTA MESA, CA 92626

Phone: (714) 556-1502

Record ID: 3001650P Service Type: RES-DETOX

Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: BALBOA HORIZONS RECOVERY SERVICES

Legal Name: BALBOA HORIZONS RECOVERY SERVICES

Address: 2864 ROYAL PALM DRIVE,

UNIT B

City, State Zip: COSTA MESA, CA 92626

Phone: (714) 546-4796

Record ID: 300165PP
Service Type: RES-DETOX

Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Address: 2864 ROYAL PALM DRIVE,

UNIT A

City, State Zip: COSTA MESA, CA 92626

Phone: (949) 437-1737
Record ID: 3001650P

Record ID: 300165QP
Service Type: RES-DETOX

Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: BALBOA HORIZONS RECOVERY SERVICES
Legal Name: BALBOA HORIZONS RECOVERY SERVICES

Address: 2868 ROYAL PALM DRIVE,

UNIT D

City, State Zip: COSTA MESA, CA 92626

Phone: (714) 556-1530

Record ID: 300165RP
Service Type: RES-DETOX

Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: BALBOA HORIZONS RECOVERY SERVICES
Legal Name: BALBOA HORIZONS RECOVERY SERVICES

Legal Name: BALBOA HORIZONS RECOVERI SERV

Address: 2864 ROYAL PALM DRIVE,

UNIT D

City, State Zip: COSTA MESA, CA 92626

Phone: (714) 556-1519 **Record ID: 300165SP**Service Type: RES-DETOX

Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: BALBOA HORIZONS RECOVERY SERVICES

Legal Name: BALBOA HORIZONS RECOVERY SERVICES

Address: 2379 ORANGE AVENUE,

UNITS B & C

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 791-8436

Record ID: 300165TP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: BALBOA HORIZONS RECOVERY SERVICES

Legal Name: BALBOA HORIZONS RECOVERY SERVICES

Address: 2379 ORANGE AVENUE,

UNIT A

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 764-9139

Record ID: 300165UP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Address: 18943 SAN FELIPE STREET City, State Zip: FOUNTAIN VALLEY, CA 92708

Phone: (714) 458-8334 **Record ID: 300165VP**Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: Yes

Program Name: MORNINGSIDE RECOVERY
Legal Name: MORNINGSIDE RECOVERY, LLC

Address: 1400 REYNOLDS AVENUE, SUITES 100,125,150, &175

City, State Zip: IRVINE, CA 92614

Phone: (949) 675-0006 Fax: (949) 675-0007

Record ID: 300168IP
Service Type: NON
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: MORNINGSIDE RECOVERY, LLC
Legal Name: MORNINGSIDE RECOVERY, LLC

Address: 9842 13TH STREET

City, State Zip: GARDEN GROVE, CA 92844

Phone: (949) 675-0006 Fax: (949) 675-0007

Record ID: 300168JP
Service Type: RES-DETOX
Resident Capacity: 87
Total Occupancy: 87

Total Occupancy: 87
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: Yes

Program Name: CAPO BY THE SEA

Legal Name: CAPO BY THE SEA, INC.

Address: 27130 B-PASEO ESPADA, SUITE 521 & 522

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 874-1332

Record ID: 300173CP
Service Type: NON
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: MIRAMAR RECOVERY
Legal Name: MIRAMAR HEALTH, INC.
Address: 339 JASMINE STREET
City, State Zip: LAGUNA BEACH, CA 92651

Phone: (949) 370-0771 Fax: (949) 554-1285

Record ID: 300182AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: DAHLIA HOUSE

Legal Name: MIRAMAR HEALTH, INC. Address: 435 DAHLIA AVENUE

City, State Zip: NEWPORT BEACH, CA 92625

Phone: (949) 497-9189 Fax: (949) 554-1285

Record ID: 300182BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

CARNATION HOUSE Program Name: Legal Name: MIRAMAR HEALTH, INC. 435-1/2 DAHLIA AVENUE Address:

City, State Zip: NEWPORT BEACH, CA 92625

Phone: (949) 370-0771 Fax: (949) 554-1285

Record ID: 300182CP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: MIRAMAR HEALTH OUTPATIENT SERVICES

Legal Name: MIRAMAR HEALTH, INC. Address: 2165 HARBOR BLVD. City, State Zip: COSTA MESA, CA 92627 (949) 370-0771 Phone:

Record ID: 300182DP Service Type: NON Target Population: 1.7

Expiration Date: 11/30/2018 IMS:

ALTERNATIVE OPTIONS Program Name:

Legal Name: ALTERNATIVE OPTIONS COUNSELING CENTER, INC. Address: 101 SOUTH KRAEMER BOULEVARD, SUITE 110

City, State Zip: PLACENTIA, CA 92870

Phone: (877) 538-4133 Fax: (562) 921-5703

Record ID: 300186AP

Service Type: NON

Target Population: 1.1

Expiration Date: 5/31/2018 IMS:

HEALTHCARE SERVICES, INC., THE LIGHTHOUSE Program Name:

Legal Name: HEALTHCARE SERVICES, INC. Address: 1320 WEST PEARL STREET

UNITS A,B,C & D

City, State Zip: ANAHEIM, CA 92801

(714) 384-3970 (714) 384-3876 Phone: Fax:

Record ID: 300188AP Service Type: RES-DETOX

Resident Capacity: 16 Total Occupancy: 16 Target Population: 1.1

5/31/2018 IMS: Expiration Date: No

Program Name: HEALTHCARE SERVICES

Legal Name: HEALTHCARE SERVICES, INC.

Address: 1340 PEARL STREET City, State Zip: ANAHEIM, CA 92801

Phone: (714) 871-9841 (714) 384-3876 Fax:

Record ID: 300188CP Service Type: RES-DETOX

Resident Capacity: 21 Total Occupancy: 21 Target Population: 1.1

Expiration Date: 5/31/2018 TMS: No

Program Name: ANAHEIM LIGHTHOUSE

Legal Name: HEALTHCARE SERVICES, INC.

Address: 1330 WEST PEARL, UNIT A, B, C, D

City, State Zip: ANAHEIM, CA 92801

Phone: (714) 780-1174 Fax: (714) 784-1124

Record ID: 300188EP Service Type: RES-DETOX

Resident Capacity: 20 Total Occupancy: 20 Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No Program Name: NEW LIFE SPIRIT RECOVERY INC. Legal Name: NEW LIFE SPIRIT RECOVERY INC. 18652 FLORIDA STREET, SUITE 200 Address: City, State Zip: HUNTINGTON BEACH, CA 92648

Fax: (714) 908-3308 Phone: (714) 841-1906

Record ID: 300190AP Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: DOMUS RETREAT DOMUS RETREAT LLC Legal Name:

Address: 270 SOUTH ORANGE ACRES DRIVE

City, State Zip: ANAHEIM HILLS, CA 92807

(310) 205-0808 Phone:

Record ID: 300203AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: ADELANTE RECOVERY CENTER, INC. Legal Name: ADELANTE RECOVERY CENTER, INC.

Address: 49 MONTECITO DRIVE

City, State Zip: CORONA DEL MAR, CA 92625

Phone: (949) 887-4448 Fax: (949) 706-9769

Record ID: 300206AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

2/28/2018 IMS: Expiration Date: No

Program Name: NORTHBOUND TREATMENT SERVICES

NATIONAL THERAPEUTIC SERVICES, INC. Legal Name:

Address: 209 AND 211 EAST 18TH STREET

COSTA MESA, CA 92627 City, State Zip: Phone: (714) 650-4334

Record ID: 300207AP

Service Type: RES-DETOX Resident Capacity: 12 Total Occupancy: 12

Target Population: 1.1

10/31/2018 Expiration Date: TMS: No

NORTHBOUND TREATMENT SERVICES Program Name:

Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.

Address: 1040 WEST 17TH STREET City, State Zip: COSTA MESA, CA 92627 (714) 650-4334 Phone:

Record ID: 300207BP Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: NORTHBOUND TREATMENT SERVICES

Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.

354 BROADWAY Address:

City, State Zip: COSTA MESA, CA 92627

(949) 650-4334 Fax: (949) 650-5171 Phone:

Record ID: 300207CP

Service Type: RES Resident Capacity: 4 Total Occupancy: 4 Target Population: 1.2

5/31/2019 Expiration Date: IMS: No Program Name: NORTHBOUND TREATMENT SERVICES

Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.

Address: 2417 ORANGE AVENUE, UNITS 101A, 101B, 101C, 102A, 201B & 201C

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 650-4334 Fax: (949) 269-9239

Record ID: 300207FP
Service Type: RES
Resident Capacity: 21
Total Occupancy: 22
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: NORTHBOUND TREATMENT SERVICES

Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.

Address: 235 EAST 18TH STREET, UNITS A, B, C AND 241 EAST 18TH STREET, UNITS A, B, C

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 650-4334 Fax: (949) 650-5171

Record ID: 300207GP

Service Type: RES Resident Capacity: 23 Total Occupancy: 24 Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: NORTHBOUND TREATMENT SERVICES

Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.

Address: 175 VIRGINIA PLACE City, State Zip: COSTA MESA, CA 92627

Phone: (949) 650-4334 Fax: (949) 650-5171

Record ID: 300207HP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: NORTHBOUND TREATMENT SERVICES

Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.

Address: 171 ROCHESTER, UNITS A & B 175 ROCHESTER, UNITS A & B

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 650-4334 Fax: (949) 650-5171

Record ID: 300207IP

Service Type: RES
Resident Capacity: 20
Total Occupancy: 20
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: NORTHBOUND TREATMENT SERVICES

Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.

Address: 125 & 131 E. WILSON STREET, UNITS 1, 2, 3

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 650-4334

Record ID: 300207KP

Service Type: RES
Resident Capacity: 26
Total Occupancy: 26
Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: NORTHBOUND TREATMENT SERVICES

Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.

Address: 1545 NEWPORT BOULEVARD City, State Zip: COSTA MESA, CA 92627

Phone: (949) 650-4334 Fax: (949) 548-4718

Record ID: 300207LP
Service Type: NON
Target Population: 1.8

Expiration Date: 3/31/2019 IMS: No

Program Name:OCEAN HILLS RECOVERY, INC.Legal Name:OCEAN HILLS RECOVERY, INC.Address:33242 CHRISTINA DRIVE

City, State Zip: DANA POINT, CA 92629

Phone: (949) 496-3794 Fax: (949) 388-8407

Record ID: 300208AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: OCEAN HILLS RECOVERY, INC.
Legal Name: OCEAN HILLS RECOVERY, INC.
Address: 33402 PALO ALTO STREET
City, State Zip: DANA POINT, CA 92629

Phone: (949) 542-8840 Fax: (949) 388-4625

Record ID: 300208BP
Service Type: RES-DETOX
Resident Canadity: 6

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: OCEAN HILLS RECOVERY, INC. Legal Name: OCEAN HILLS RECOVERY, INC.

Address: 34062 AMBER LANTERN City, State Zip: DANA POINT, CA 92629

Phone: (949) 524-8840 Fax: (949) 218-6157

Record ID: 300208CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: OCEAN HILLS RECOVERY, INC. Legal Name: OCEAN HILLS RECOVERY, INC.

Address: 33701 BIG SUR

City, State Zip: DANA POINT, CA 92629

Phone: (949) 429-6076

Record ID: 300208DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: 21ST CENTURY WELLNESS, INC.
Legal Name: 21ST CENTURY WELLNESS, INC.

Address: 23792 ROCKFIELD BOULEVARD, SUITE 100

City, State Zip: LAKE FOREST, CA 92630

Phone: (949) 900-8260 Fax: (949) 900-8268

Record ID: 300211AP

Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: ASSOCIATES IN COUSELING & MEDIATION
Legal Name: ASSOCIATES IN COUNSELING & MEDIATION
Address: 265 SOUTH ANITA DRIVE, SUITE 117

City, State Zip: ORANGE, CA 92868

Phone: (714) 547-1404 Fax: (714) 550-4677

Record ID: 300213AP
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name:ASSOCIATES IN COUNSELING & MEDIATIONLegal Name:ASSOCIATES IN COUNSELING & MEDIATIONAddress:25201 PASEO DE ALICIA, SUITE 100

City, State Zip: LAGUNA HILLS, CA 92653

Phone: (714) 554-1404 Fax: (714) 550-4677

Record ID: 300213BP
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name:ASSOCIATESIN COUNSELING & MEDIATIONLegal Name:ASSOCIATESIN COUNSELING & MEDIATIONAddress:960 WEST 17TH STREET, SUITE B/C

City, State Zip: SANTA ANA, CA 92706

Phone: (714) 547-1404 Fax: (714) 550-4677

Record ID: 300213CP

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: SOVEREIGN HEALTH OF CALIFORNIA

Legal Name: DUAL DIAGNOSIS TREATMENT CENTER, INC.

Address: 1211 PUERTA DEL SOL, SUITE 120

City, State Zip: SAN CLEMENTE, CA 92673

Phone: (949) 276-5553 Fax: (949) 498-2619

Record ID: 300217AP

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: SOVEREIGN BY THE SEA II

Legal Name: DUAL DIAGNOSIS TREATMENT CENTER, INC.

Address: 29371 LAS CRUCES

City, State Zip: LAGUNA NIGUEL, CA 92677

Phone: (949) 481-1136 Fax: (949) 498-2619

Record ID: 300217CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: SOVEREIGN HEALTH ACASO

Legal Name: DUAL DIAGNOSIS TREATMENT CENTER, INC.

Address: 29372 VIA ACASO DRIVE City, State Zip: LAGUNA NIGUEL, CA 92677

Phone: (948) 481-1086 Fax: (949) 498-2619

Record ID: 300217DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: SAFE HARBOR'S CAPELLA I
Legal Name: SAFE HARBOR'S CAPELLA, INC.

Address: 546 BERNARD STREET City, State Zip: COSTA MESA, CA 92627

Phone: (714) 323-8294 Fax: (714) 242-6775

Record ID: 300221AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 10/31/2018 IMS: No

Program Name: SAFE HARBOR'S CAPELLA
Legal Name: SAFE HARBOR'S CAPELLA, INC.

Address: 550A BERNARD STREET City, State Zip: COSTA MESA, CA 92627

Phone: (714) 323-8294 Fax: (714) 242-6775

Record ID: 300221BP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 10/31/2018 IMS: No

Program Name: SAFE HARBOR'S CAPELLA III Legal Name: SAFE HARBOR'S CAPELLA, INC.

Address: 550B BERNARD STREET City, State Zip: COSTA MESA, CA 92627

Phone: (714) 323-8294 Fax: (714) 242-6775

Record ID: 300221CP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 10/31/2018 IMS: No

Program Name: SAFE HARBOR'S CAPELLA II
Legal Name: SAFE HARBOR'S CAPELLA, INC.

Address: 548 BERNARD STREET City, State Zip: COSTA MESA, CA 92627

Phone: (714) 323-8294 Fax: (714) 242-6775

Record ID: 300221DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 10/31/2018 IMS: No

Program Name: CASA BELLA RECOVERY

Legal Name: CASA BELLA RECOVERY INTERNATIONAL INC.

Address: 31365 MONTEREY STREET City, State Zip: LAGUNA BEACH, CA 92651

Phone: (949) 715-0467 Fax: (949) 715-0467

Record ID: 300222AP
Service Type: RES-DETOX

Resident Capacity: 10 Total Occupancy: 10 Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: CASA BELLA RECOVERY COUNSELING & THERAPY
Legal Name: CASA BELLA RECOVERY INTERNATIONAL INC.
Address: 3284 PACIFIC COAST HIGHWAY, SUITE N

City, State Zip: DANA POINT, CA 92629

Phone: (949) 275-7581 Fax: (949) 715-0467

Record ID: 300222BP

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: DEE'S HOUSE
Legal Name: DEE'S HOUSE, LLC

Address: 18886 SANTA MARTA STREET City, State Zip: FOUNTAIN VALLEY, CA 92708

Phone: (714) 374-6873 Fax: (714) 374-6873

Record ID: 300223AP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 5/31/2018 IMS: No

Program Name: NEW METHOD WELLNESS, INC.
Legal Name: NEW METHOD WELLNESS, INC.

Address: 31473 RANCHO VIEJO ROAD, SUITES 101, 102, 103, AND 104

31461 RANCHO VIEJO ROAD, SUITE 105

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 463-0924 Fax: (949) 472-4352

Record ID: 300229AP
Service Type: NON
Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: NEW METHOD WELLNESS
Legal Name: NEW METHOD WELLNESS, INC.
Address: 313 CALLE VILLARIO
City, State Zip: SAN CLEMENTE, CA 92627

Phone: (949) 951-1824 Fax: (949) 472-4352

Record ID: 300229BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: NEW METHOD WELLNESS

Legal Name: NEW METHOD WELLNESS, INC. Address: 34741 CALLE LAS FLORES City, State Zip: CAPISTRANO BEACH, CA 92624

Phone: (949) 951-1824 Fax: (949) 472-4352

Record ID: 300229CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: LUMINANCE RECOVERY CENTER, LLC
Legal Name: LUMINANCE RECOVERY CENTER, LLC

Address: 27126 B PASEO ESPADA, SUITE 721, 722, & 723

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 359-7301

Record ID: 300231AP
Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: NEWPORT ACADEMY

Legal Name: MONROE OPERATIONS, LLC
Address: 811 N. RANCH WOOD TRAIL

City, State Zip: ORANGE, CA 92869

Phone: (714) 288-0872 Fax: (714) 288-2045

Record ID: 300233AP

Service Type: DSS Target Population: 1.5

Expiration Date: 11/30/2017 IMS: No

NEWPORT ACADEMY Program Name:

Legal Name: MONROE OPERATIONS, LLC Address: 1655 N. HUNTERS WAY City, State Zip: ORANGE, CA 92869

(714) 288-2099 Phone: (714) 288-9052 Fax:

Record ID: 300233BP Service Type: DSS Target Population: 1.5

Expiration Date: 11/30/2017 IMS: No

Program Name: NEWPORT ACADEMY INTENSIVE OUTPATIENT & DAY TREATMENT PROGRAM

Legal Name: MONROE OPERATIONS, LLC Address: 3189 PULLMAN STREET City, State Zip: COSTA MESA, CA 92626

Phone: (949) 721-4091 Fax: (949) 243-0282

Record ID: 300233DP Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

NEWPORT ACADEMY Program Name:

Legal Name: MONROE OPERATIONS, LLC

Address: 1655 NORTH HUNTERS WAY, BUILDING 3

City, State Zip: ORANGE, CA 92869

Phone: (714) 271-3043 Fax: (714) 288-2099

Record ID: 300233EP NON Service Type:

Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

NEWPORT ACADEMY Program Name:

Legal Name: MONROE OPERATIONS, LLC

Address: 811 NORTH RANCH WOOD TRAIL, BUILDING 3

City, State Zip: ORANGE, CA 92869

Phone: (714) 288-0872 Fax: (714) 271-3043

Record ID: 300233FP Service Type: NON

Target Population: 1.1

7/31/2018 Expiration Date: TMS: No

NEWPORT ACADEMY Program Name:

Legal Name: MONROE OPERATIONS, LLC Address: 20115 HILLSIDE DRIVE City, State Zip: ORANGE, CA 92869

Phone: (714) 376-5889 Fax: (714) 288-2099

Record ID: 300233GP

Service Type: DSS Target Population: 1.5

11/30/2018 Expiration Date: TMS: No

NEWPORT ACADEMY Program Name:

Legal Name: MONROE OPERATIONS, LLC Address: 760 N. RODEO CIRCLE City, State Zip: ORANGE, CA 92869

(714) 376-5889 (714) 288-2099 Phone: Fax:

Record ID: 300233HP Service Type: DSS Target Population: 1.5

11/30/2018 IMS: Expiration Date: No

JUST ONE RECOVERY Program Name: JUST ONE RECOVERY Legal Name:

Address: 262 & 264 N. CLEVELAND STREET

ORANGE, CA 92866 City, State Zip:

Phone: (714) 538-8085 Fax: (714) 628-9884

Record ID: 300234AN Service Type: RES-DETOX

Resident Capacity: 4 Total Occupancy: 6 Target Population: 1.2

Expiration Date: 1/31/2018 IMS: No Program Name: SURE HAVEN Legal Name: SURE HAVEN

725 CENTER STREET, UNITS A AND B Address:

City, State Zip: COSTA MESA, CA 92626

(949) 467-9213 Ext:228 Fax: Phone: (888) 588-4998

Record ID: 300235DP Service Type: RES-DETOX

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: SURE HAVEN Legal Name: SURE HAVEN

Address: 3072 & 3073 MADISON AVENUE

City, State Zip: COSTA MESA, CA 92626

Phone: (828) 773-4477

Record ID: 300235GP Service Type: RES-DETOX

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

9/30/2018 IMS: Expiration Date: Nο

Program Name: SURE HAVEN Legal Name: SURE HAVEN

Address: 3125 AND 3129 PIERCE AVENUE

City, State Zip: COSTA MESA, CA 92626

Phone: (949) 467-9213 Fax: (888) 588-4998

Record ID: 300235QP Service Type: RES-DETOX

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

IMS: Expiration Date: 12/31/2017 No

SOVEREIGN BY THE SEA II Program Name:

Legal Name: SATYA HEALTH OF CALIFORNIA, INC.

Address: 105 AVENIDA PALA

City, State Zip: SAN CLEMENTE, CA 92672

Phone: (949) 545-6853 Fax: (949) 265-0446

Record ID: 300236AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 1/31/2018 IMS:

ORANGE COUNTY RECOVERY SERVICES Program Name:

Legal Name: ORANGE COUNTY RECOVERY SERVICES, LLC

Address: 19322 BEACH BOULEVARD City, State Zip: HUNTINGTON BEACH, CA 92648

Fax: (949) 515-9193 Phone: (949) 515-9191

300237AP Record ID:

Service Type: NON Target Population: 1.1

1/31/2018 Expiration Date: IMS: No

Program Name: PACIFIC SHORES RECOVERY

Legal Name: PACIFIC SHORES RECOVERY, LLC Address: 3309 CLAY STREET

City, State Zip: NEWPORT BEACH, CA 92663

Phone: (949) 574-2510 Fax: (949) 642-3460

Record ID: 300238AP

Service Type: RES Resident Capacity: 6 7 Total Occupancy: Target Population: 1.1

IMS: Expiration Date: 1/31/2018 No Program Name: CHAPTERS CAPISTRANO

Legal Name: CHAPTERS CAPISTRANO, LLC

Address: 1525 BUENA VISTA, UNITS A, B AND C

City, State Zip: SAN CLEMENTE, CA 92672

Phone: (949) 481-2766 Fax: (949) 545-6237

Record ID: 300239AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: CHAPTERS CAPISTRANO
Legal Name: CHAPTERS CAPISTRANO, LLC
Address: 222 AVENIDA LA CUESTA
City, State Zip: SAN CLEMENTE, CA 92672

Phone: (949) 698-2249
Record ID: 300239BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: NEWPORT BEACH RECOVERY CENTER Legal Name: NEWPORT BEACH RECOVERY CENTER

Address: 207 28TH STREET

City, State Zip: NEWPORT BEACH, CA 92663

Phone: (949) 200-9372 Fax: (949) 612-7968

Record ID: 300240AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 2/28/2018 IMS: No

Program Name: 449 RECOVERY

Legal Name: FOUR FORTY-NINE, INC. Address: 26010 ACERO STREET

SUITE 100

City, State Zip: MISSION VIEJO, CA 92691

Phone: (855) 444-4490 Fax: (949) 429-0767

Record ID: 300242AP

Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: PACE RECOVERY CENTER, LLC
Legal Name: PACE RECOVERY CENTER, LLC

Address: 209 22ND STREET

City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (714) 274-9239 Fax: (714) 369-2159

Record ID: 300244AP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 7/31/2018 IMS: No

Program Name: PACE RECOVERY CENTER, LLC
Legal Name: PACE RECOVERY CENTER, LLC

Address: 528 16TH STREET

City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (714) 369-2137 Fax: (714) 369-2139

Record ID: 300244BP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 2/28/2019 IMS: No

Program Name: PACE RECOVERY CENTER, LLC
Legal Name: PACE RECOVERY CENTER, LLC
Address: 3197-B AIRPORT LOOP DRIVE
City, State Zip: COSTA MESA, CA 92626

Phone: (714) 884-4558 Fax: (714) 274-9517

Record ID: 300244CP Service Type: NON

Target Population: 1.2

Expiration Date: 2/28/2019 IMS: No

Program Name: PACE RECOVERY CENTER
Legal Name: PACE RECOVERY CENTER, LLC

Address: 414 11TH STREET

City, State Zip: HUNTINGTON BEACH, CA 92648-4508

Phone: (714) 369-6504

Record ID: 300244DP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 9/30/2018 IMS: No

Program Name: PACE RECOVERY CENTER

Legal Name: PACE RECOVERY CENTER, LLC

Address: 526 16TH STREET

City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (949) 640-0018 Fax: (714) 274-9517

Record ID: 300244EP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 1/31/2018 IMS: No

Program Name: SOUTH ORANGE COUNTY DETOX TREATMENT

Legal Name: ALEXANDRA ROSE CORPORATION

Address: 4009 CALLE ABRIL

City, State Zip: SAN CLEMENTE, CA 92673

Phone: (714) 785-2512 Fax: (949) 481-4949

Record ID: 300245AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: SOUTH ORANGE COUNTY DETOX AND TREATMENT

Legal Name: ALEXANDRA ROSE CORPORATION
Address: 35402 CAMINO CAPISTRANO
City, State Zip: DANA POINT, CA 92624

Phone: (949) 584-8927 Fax: (949) 481-4949

Record ID: 300245BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name:WINDWARD WAY RECOVERYLegal Name:WINDWARD WAY RECOVERY LLCAddress:2787 BRISTOL STREETCity, State Zip:COSTA MESA, CA 92626

Phone: (887) 713-2669 Fax: (887) 820-8959

Record ID: 300246AP

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: WINDWARD WAY

Legal Name: WINDWARD WAY RECOVERY LLC

Address: 316 HAMILTON STREET City, State Zip: COSTA MESA, CA 92627

Phone: (949) 903-1053 Fax: (877) 820-8959

Record ID: 300246BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 7/31/2019 IMS: No

Program Name: WINDWARD WAY

Legal Name: WINDWARD WAY RECOVERY LLC

Address: 395 VICTORIA STREET

City, State Zip: COSTA MESA, CA 92627-1548

Phone: (949) 525-6871 Fax: (977) 820-8959

Record ID: 300246CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 10/31/2019 IMS: No

Program Name: WINDWARD WAY

Legal Name: WINDWARD WAY RECOVERY LLC

Address: 165 23RD STREET

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 903-1053 Fax: (877) 820-8959

Record ID: 300246EP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 10/31/2018 IMS: No

Program Name: SIMPLE RECOVERY INC.
Legal Name: SIMPLE RECOVERY INC.

Address: 9531 NETHERWAY DRIVE

City, State Zip: HUNTINGTON BEACH, CA 92646

Phone: (949) 646-3600 Fax: (949) 646-3100

Record ID: 300247AP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 12/31/2019 IMS: No

Program Name: SIMPLE RECOVERY INC.
Legal Name: SIMPLE RECOVERY INC.
Address: 1901 NEWPORT BOULEVARD,
SUITE 156, 165, 200 & 225

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 646-3600 Fax: (949) 646-3100

Record ID: 300247BP Service Type: NON

Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: SIMPLE RECOVERY INC.
Legal Name: SIMPLE RECOVERY INC.
Address: 20112 VIVA CIRCLE

City, State Zip: HUNTINGTON BEACH, CA 92646

Phone: (949) 646-3600

Record ID: 300247CP
Service Type: RES

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: SIMPLE RECOVERY INC.
Legal Name: SIMPLE RECOVERY INC.
Address: 20621 PAISLEY LANE

City, State Zip: HUNTINGTON BEACH, CA 92646

Phone: (949) 646-3600 Fax: (714) 646-3100

Record ID: 300247DP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: ENCOMPASS RECOVERY

Legal Name: ENCOMPASS TREATMENT SERVICES, LLC
Address: 27122A PASEO ESPADA, SUITE 924
City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 218-4102 Fax: (509) 463-7115

Record ID: 300248AP
Service Type: NON
Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: NEW START DETOX

Legal Name: LIBERTY HOUSING SERVICES, INC.

Address: 906 DORMAN STREET
City, State Zip: SANTA ANA, CA 92701

Phone: (714) 486-3691 Fax: (714) 884-3896

Record ID: 300249AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: NEW START DETOX

Legal Name: LIBERTY HOUSING SERVICES, INC.

Address: 13832 GLENMERE DRIVE City, State Zip: SANTA ANA, CA 92705

Phone: (714) 332-3143 Fax: (714) 486-2127

Record ID: 300249BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 9/30/2018 IMS: No

Program Name: HARMONY HEALS, INC.
Legal Name: HARMONY HEALS, INC.
Address: 23173 LA CADENA DRIVE
City, State Zip: LAGUNA HILLS, CA 92653

Phone: (949) 837-2751 Fax: (888) 762-3708

Record ID: 300250AP

Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: STEPHOUSE RECOVERY CENTER
Legal Name: THE STEPHOUSE RECOVERY, INC.

Address: 1601 BAKER STREET
City, State Zip: COSTA MESA, CA 92626

Phone: (714) 933-6601 Fax: (657) 845-7531

Record ID: 300251BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: STEPHOUSE RECOVERY CENTER

Legal Name: THE STEPHOUSE RECOVERY, INC.

10529 SLATER AVENUE, SUITES 10505, 10507 & 10537 Address:

City, State Zip: FOUNTAIN VALLEY, CA 92708

(657) 845-7531 Phone: (741) 933-6601 Fax:

Record ID: 300251CP Service Type: NON Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: STEPHOUSE RECOVERY CENTER

Legal Name: THE STEPHOUSE RECOVERY, INC.

Address: 17981 LOS TIEMPOS

City, State Zip: FOUNTAIN VALLEY, CA 92708

(714) 933-6559 Phone:

Record ID: 300251DP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: GET REAL RECOVERY, INC. Legal Name: GET REAL RECOVERY, INC.

Address: 30290 RANCHO VIEJO ROAD, SUITE 204

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 449-2429 Fax: (888) 835-3339

Record ID: 300252AP

Service Type: NON

Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

GET REAL RECOVERY, INC Program Name: Legal Name: GET REAL RECOVERY, INC.

Address: 28334 PASEO MICHELLE

City, State Zip: SAN JUAN CAPISTRANO, CA 92675 (949) 933-2505 Fax: (888) 835-3339 Phone:

300252BP Record ID: RES-DETOX

Service Type: Resident Capacity: 6 Total Occupancy: 6

Target Population: 1.1

2/28/2018 IMS: Expiration Date: No

Program Name: GET REAL RECOVERY, INC. Legal Name: GET REAL RECOVERY, INC. Address: 29521 ANA MARIA LANE City, State Zip: LAGUNA NIGUEL, CA 92677

Phone: (949) 933-2505 Fax: (888) 835-3339

Record ID: 300252CP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.8

11/30/2018 IMS: Expiration Date: No

Program Name: TREE HOUSE RECOVERY (THR) Legal Name: ARROWOOD CAPITAL, INC. Address: 1956 POMONA AVENUE

City, State Zip: COSTA MESA, CA 92627

(855) 447-8733 Fax: (714) 968-2752 Phone:

Record ID: 300253AP

Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.2

Expiration Date: 1/31/2019 IMS: No Program Name: SOBERTEC LLC
Legal Name: SOBERTEC LLC

Address: 125 COLUMBIA, SUITE B City, State Zip: ALISO VIEJO, CA 92656

Phone: (949) 344-2742 Fax: (949) 366-5964

Record ID: 300254AP
Service Type: NON

Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: SOBERTEC LLC
Legal Name: SOBERTEC LLC

Address: 610 AVENIDA ACAPULCO City, State Zip: SAN CLEMENTE, CA 92672

Phone: (949) 481-2681

Record ID: 300254BP
Service Type: RES-DETOX

Resident Capacity: 8
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: SOBERTEC LLC
Legal Name: SOBERTEC LLC
Address: 31472 ISLE VISTA

City, State Zip: LAGUNA NIGUEL, CA 92677

Phone: (949) 340-3885

Record ID: 300254DP Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: SOBERTEC LLC
Legal Name: SOBERTEC LLC

Address: 402 PASADENA COURT, UNITS 1, 2, AND 3

City, State Zip: SAN CLEMENTE, CA 92672

Phone: (949) 429-5456

Record ID: 300254EP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: SOBERTEC LLC
Legal Name: SOBERTEC LLC
Address: 33801 VIA CASCADA

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (339) 293-9066

Record ID: 300254HP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name:SOBERTEC LLCLegal Name:SOBERTEC LLCAddress:4425 MAR ESCARPA

City, State Zip: SAN CLEMENTE, CA 92673

Phone: (949) 340-1108

Record ID: 300254IP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: ZEN RECOVERY, LLC
Legal Name: ZEN RECOVERY, LLC
Address: 126 E. 16TH STREET
City, State Zip: COSTA MESA, CA 92627

Phone: (949) 940-5445 Fax: (714) 242-1975

Record ID: 300260AP
Service Type: NON
Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: SOUTH COAST BEHAVIORIAL HEALTH

Legal Name: SOUTH COAST BEHAVIORAL HEALTH GUESTHOUSE, INC

Address: 3151 AIRWAY AVENUE, N1-N2 City, State Zip: COSTA MESA, CA 92626

Phone: (866) 811-5249

Record ID: 300261AP
Service Type: NON
Target Population: 1.1

Expiration Date: 9/30/2017 IMS: No

Program Name: APOLLO RECOVERY

Legal Name: ARTEMIS HILL RECOVERY INC. Address: 17429 SANTA LUCIA STREET City, State Zip: FOUNTAIN VALLEY, CA 92708

Phone: (714) 274-9766 Fax: (562) 431-0840

Record ID: 300262AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 10/31/2019 IMS: No

Program Name: SOUTHERN CALIFORNIA RECOVERY CENTERS

Legal Name: TML RECOVERY, LLC
Address: 34249 CAMINO CAPISTRANO
City, State Zip: DANA POINT, CA 92629

Phone: (800) 410-6552

Record ID: 300265AP

Record ID: 3003 Service Type: NON Target Population: 1.2

Expiration Date: 2/28/2018 IMS: No

Program Name: LIGHTHOUSE TREATMENT CENTER

Legal Name: WINDSTONE ADDICTION CENTERS, INC.

Address: 1310 W. PEARL STREET City, State Zip: ANAHEIM, CA 92801

Phone: (714) 780-1174 Fax: (714) 780-1124

Record ID: 300266AP
Service Type: RES-DETOX

Resident Capacity: 22 Total Occupancy: 22 Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: LIGHTHOUSE TREATMENT CENTER

Legal Name: WINDSTONE ADDICTION CENTERS, INC.

Address: 1243 W. PEARL ST. City, State Zip: ANHIEM, CA 92801

Phone: (714) 780-1174 Ext:136 Fax: (714) 833-5038

Record ID: 300266BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 11/30/2017 IMS: No

Program Name: LIGHTHOUSE TREATMENT CENTER

Legal Name: WINDSTONE ADDICTION CENTERS, INC.

Address: 1243 1/2 W. PEARL STREET

City, State Zip: ANAHEIM, CA 92801

Phone: (714) 833-5604 Fax: (714) 833-5038

Record ID: 300266CP
Service Type: RES-DETOX

Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.3

Expiration Date: 7/31/2018 IMS: No

Program Name: LIGHTHOUSE TREATMENT CENTER

Legal Name: WINDSTONE ADDICTION CENTERS, INC.

Address: 1253 W. PEARL ST. City, State Zip: ANAHEIM, CA 92801

Phone: (714) 833-5604 Fax: (714) 833-5038

Record ID: 300266DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: LIGHTHOUSE TREATMENT CENTER

Legal Name: WINDSTONE ADDICTION CENTERS, INC.

Address: 1300 W. PEARL STREET City, State Zip: ANAHEIM, CA 92801

Phone: (714) 833-5604 Fax: (714) 833-5038

Record ID: 300266EP

Service Type: RES-DETOX Resident Capacity: 17

Resident Capacity: 17
Total Occupancy: 17
Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: SURF CITY RECOVERY

Legal Name: SURF CITY RECOVERY

Address: 18090 BEACH BOULEVARD, SUITE 5 City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (949) 209-7765

Record ID: 300267AP
Service Type: NON

Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: SURF CITY RECOVERY
Legal Name: SURF CITY RECOVERY
Address: 9872 BIG SUR DRIVE

City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (714) 841-3863

Record ID: 300267BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: CASA RECOVERY

Legal Name: CASA RECOVERY, INC.

Address: 31877 DEL OBISPO STREET, SUITE 104

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (888) 928-2272 Fax: (949) 284-0574

Record ID: 300268BP

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: HOTEL CALIFORNIA BY THE SEA, LLC
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC

Address: 4504 SEASHORE DRIVE City, State Zip: NEWPORT BEACH, CA 92663

Phone: (951) 212-0439 Fax: (310) 400-5846

Record ID: 300270AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 1/31/2020 IMS: No

Program Name: HOTEL CALIFORNIA BY THE SEA
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC
Address: 230 EAST 17TH STREET SUITE 201

City, State Zip: COSTA MESA, CA 92627

Phone: (800) 762-6717 Fax: (949) 629-3883

Record ID: 300270BP
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: HOTEL CALIFORNIA BY THE SEA, LLC
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC
Address: 1509 ORANGE AVENUE, A AND B

City, State Zip: COSTA MESA, CA 92627

Phone: (951) 212-0439 Fax: (310) 400-5846

Record ID: 300270CP
Service Type: RES-DETOX
Resident Capacity: 12

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: HOTEL CALIFORNIA BY THE SEA
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC

Address: 317 ROCHESTER AVENUE City, State Zip: COSTA MESA, CA 92627

Phone: (951) 212-0439 Fax: (310) 400-5846

Record ID: 300270DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: HOTEL CALIFORNIA BY THE SEA
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC
Address: 400 WESTMINSTER AVENUE, SUITE 1

City, State Zip: NEWPORT BEACH, CA 92663

Phone: (947) 220-0049 Fax: (310) 400-5846

Record ID: 300270EP

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: HOTEL CALIFORNIA BY THE SEA
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC
Address: 204 E. 17TH STREET, SUITE 203

City, State Zip: COSTA MESA, CA 92627 Phone: (949) 220-0052

Record ID: 300270FP
Service Type: NON
Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: HOTEL CALIFORNIA BY THE SEA
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC

Address: 19371 WORCHESTER LANE

City, State Zip: HUNTINGTON BEACH, CA 92646

Phone: (951) 212-0439 Fax: (310) 400-5864

Record ID: 300270GP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: HOTEL CALIFORNIA BY THE SEA

Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC

Address: 19240 BEACH BLVD.

City, State Zip: HUNTINGTON BEACH, CA 92627

Phone: (951) 212-0439 Fax: (310) 400-5864

Record ID: 300270HP
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: HOTEL CALIFORNIA BY THE SEA

Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC

Address: 19671 DITMAR LANE

City, State Zip: HUNTINGTON BEACH, CA 92646

Phone: (951) 212-0439 Fax: (310) 400-5864

Record ID: 300270IP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: HOTEL CALIFORNIA BY THE SEA

Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC

Address: 18801 FLAGSTAFF LANE

City, State Zip: HUNTINGTON BEACH, CA 92646

Phone: (951) 212-0439 Fax: (310) 400-5864

Record ID: 300270JP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: A MISSION FOR MICHAEL, INC. Legal Name: A MISSION FOR MICHAEL, INC.

A MISSION FOR MICHAEL, INC.
Address: 647 CAMINO DE LOS MARES, SUITE 201

City, State Zip: SAN CLEMENTE, CA 92673

Phone: (949) 489-0950 Fax: (949) 489-0959

Record ID: 300272AP

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: PACIFIC PALMS RECOVERY

Legal Name: PACIFIC PALMS RECOVERY, LLC

Address: 3551 CAMINO MIRA COSTA, SUITES F AND T

City, State Zip: SAN CLEMENTE, CA 92672

Phone: (949) 943-5188 Fax: (949) 542-8565

Record ID: 300273AP

Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: HARMONY HEALS DETOX
Legal Name: COMPLETE RESURGENCY, LLC
Address: 31957 AND 31959 VIRGINIA WAY

City, State Zip: LAGUNA BEACH, CA 92651

Phone: (949) 837-2751 Fax: (949) 600-7113

Record ID: 300277AP
Service Type: RES-DETOX

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: EMBRACE RECOVERY

Legal Name: EMBRACE RECOVERY, LLC

Address: 23232 PERALTA DRIVE, SUITE 219

City, State Zip: LAGUNA HILLS, CA 92653

Phone: (949) 525-3696

Record ID: 300288AP
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: SOCAL DETOX

Legal Name: SOCAL DETOX LLC

Address: 1703 AVENIDA SALVADOR City, State Zip: SAN CLEMENTE, CA 92672

Phone: (888) 590-0777 Fax: (360) 323-7285

Record ID: 300290AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: SOCAL DETOX

Legal Name: SOCAL DETOX LLC
Address: 835 AVENIDA SALVADOR
City, State Zip: SAN CLEMENTE, CA 92672

Phone: (888) 590-0777 Fax: (360) 323-7285

Record ID: 300290BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: SPENCER RECOVERY CENTERS

Legal Name: COAST TO COAST REFERRAL CENTER, INC.

Address: 1337 GAVIOTA

City, State Zip: LAGUNA BEACH, CA 92651

Phone: (949) 376-3705 Fax: (949) 376-6862

Record ID: 300291AN Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: COAST TO COAST REFERRAL CENTER

Legal Name: COAST TO COAST REFERRAL CENTER, INC. Address: 665 CAMINO DE LOS MARES, SUITE 104B

City, State Zip: SAN CLEMENTE, CA 92673

Phone: (949) 313-5200 Fax: (949) 313-5240

Record ID: 300291BN

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: WJW TREATMENT CENTERS

Legal Name: CACTUS GARDENS OPPORTUNITY HOUSE, INC.

Address: 13212 & 13222 CHAPMAN AVENUE

City, State Zip: GARDEN GROVE, CA 92840

Phone: (714) 703-9492 Fax: (714) 740-2030

Record ID: 300292AN
Service Type: RES-DETOX

Resident Capacity: 16 Total Occupancy: 19 Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: NSIGHT OUTPATIENT PROGRAM

Legal Name: INSIGHT PSYCHOLOGY AND ADDICTION INC.

Address: 4000 BIRCH STREET,

SUITE 112A

City, State Zip: NEWPORT BEACH, CA 92660

Phone: (888) 256-2201 Fax: (949) 203-0402

Record ID: 300293AP
Service Type: NON
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: COMMUNITY REHAB

Legal Name: TRINITY REHAB GROUP, LLC. Address: 129 W PALMYRA AVENUE City, State Zip: ORANGE, CA 92866

Phone: (714) 797-1264 Fax: (714) 970-1965

Record ID: 300294AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: AKUA MIND & BODY

Legal Name: AKUA BEHAVIORAL HEALTH, INC.

Address: 1119 SUNFLOWER AVENUE
City, State Zip: COSTA MESA, CA 92626
Phone: (949) 279-1376

Record ID: (949) 279-13

Service Type: RES-DETOX Resident Capacity: 6 Total Occupancy: 6

Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: AKUA MIND & BODY

Legal Name: AKUA BEHAVIORAL HEALTH, INC.
Address: 20271 SW BIRCH STREET, SUITE 202

City, State Zip: NEWPORT BEACH, CA 92660

Phone: (714) 557-2350 Fax: (714) 947-4058

Record ID: 300297BP Service Type: NON

Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: AKUA MIND & BODY

Legal Name: AKUA BEHAVIORAL HEALTH, INC.

Address: 369 RALCAM PLACE City, State Zip: COSTA MESA, CA 92627

Phone: (949) 777-2283 Fax: (949) 777-2282

Record ID: 300297CP Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: AKUA MIND & BODY

Legal Name: AKUA BEHAVIORAL HEALTH, INC.

725 W. 20TH STREET Address: City, State Zip: COSTA MESA, CA 92627

Phone: (949) 873-5013

Record ID: 300297EP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: CROSSROADS RECOVERY CENTERS

Legal Name: DIVINE REHABILITATION, EDUCATION, & HOUSING NETWORK

Address: 402 EAST LA HABRA BOULEVARD

City, State Zip: LA HABRA, CA 90631 Phone: (877) 293-0722

Record ID: 300298AP Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2018 IMS:

SECOND CHANCE ADDICTION RECOVERY CENTER, INC. Program Name: Legal Name: SECOND CHANCE ADDICTION RECOVERY CENTER, INC.

Address: 1335 SOUTH EUCLID STREET

City, State Zip: ANAHEIM, CA 92802

Phone: (714) 215-4371 Fax: (715) 533-7398

Record ID: 300299AP

Service Type: NON

Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

PATH TO SERENITY Program Name:

Legal Name: RECOVERY BAY REHABILITATION CENTER, LLC

Address: 18912 PATRICIAN DRIVE City, State Zip: VILLA PARK, CA 92861

(949) 289-0350 Phone: Fax: (949) 209-3710

Record ID: 300300AP RES-DETOX Service Type:

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.3

2/28/2019 Expiration Date: IMS: No

Program Name: ADDICTION RECOVERY REHAB

Legal Name: RECOVERY BAY REHABILITATION CENTER, LLC

10002 BRILEY WAY Address: City, State Zip: VILLA PARK, CA 92861

Phone: (949) 289-0350 Fax: (949) 209-3710

Record ID: 300300BP RES-DETOX Service Type:

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.2

Expiration Date: 1/31/2019 IMS: No

Program Name: GRANT ME THE COURAGE RECOVERY

GRANT ME THE COURAGE RECOVERY, LLC Legal Name: Address: 3230 E. IMPERIAL HIGHWAY, SUITE 312

City, State Zip: BREA, CA 92821

(714) 674-0000 Phone: Fax: (866) 653-9110

Record ID: 300302AP

Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

CLEAN PATH RECOVERY Program Name: Legal Name: CLEAN PATH RECOVERY, LLC

2200 HARBOR BOULEVARD, SUITE C-210 Address:

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 734-7432 Record ID: 300303AP

Service Type: NON Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: CLEAN PATH RECOVERY Legal Name: CLEAN PATH RECOVERY, LLC Address: 1650 ADAMS AVENUE

City, State Zip: COSTA MESA, CA 92626

Phone: (949) 734-7432 Fax: (949) 209-1884

Record ID: 300303BP Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

CLEAN PATH BEHAVIORAL HEALTH Program Name:

Legal Name: CLEAN PATH RECOVERY, LLC Address: 2822 MONTEREY AVENUE City, State Zip: COSTA MESA, CA 92626

Phone: (949) 734-7432 Ext:110 Fax: (949) 209-1884

Record ID: 300303CP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 6/30/2018 IMS:

CLEAN PATH RECOVERY Program Name:

Legal Name: CLEAN PATH RECOVERY, LLC

Address: 2272 PAMELA LANE,

UNIT A

City, State Zip: COSTA MESA, CA 92627

(949) 734-7432 Ext:129 Fax: (949) 209-1884 Phone:

300303DP Record ID: RES

Service Type: Resident Capacity: Total Occupancy: 7 Target Population: 1.1

IMS: Expiration Date: 6/30/2018 No

Program Name: CLEAN PATH BEHAVIORAL HEALTH Legal Name: CLEAN PATH RECOVERY, LLC

Address: 973 ARBOR STREET

City, State Zip: COSTA MESA, CA 92627

(949) 734-7432 Ext:115 Fax: Phone: (949) 209-1884

Record ID: 300303EP

Service Type: RES Resident Capacity: Total Occupancy: 6 Target Population: 1.1

Expiration Date: 6/30/2018 TMS: No

Program Name: CLEAN PATH RECOVERY Legal Name: CLEAN PATH RECOVERY, LLC

308 22ND STREET Address:

City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (949) 734-7432 Fax: (949) 209-1884

Record ID: 300303GP

Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No Program Name: CLEAN PATH RECOVERY
Legal Name: CLEAN PATH RECOVERY, LLC
Address: 2272 PAMELA LANE, UNIT B
City, State Zip: COSTA MESA, CA 92627

Phone: (949) 734-7432 Fax: (949) 209-1884

Record ID: 300303HP

Service Type: RES
Resident Capacity: 3
Total Occupancy: 3
Target Population: 1.8

Expiration Date: 10/31/2018 IMS: No

Program Name: CLEAN PATH RECOVERY
Legal Name: CLEAN PATH RECOVERY, LLC
Address: 2272 PAMELA LANE, UNIT C
City, State Zip: COSTA MESA, CA 92627

Phone: (949) 734-7432 Fax: (949) 209-1884

Record ID: 300303IP

Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.8

Expiration Date: 10/31/2018 IMS: No

Program Name: SOBER PARTNERS BEACH HOUSE

Legal Name: PARTNERS PROJECT INC.

Address: 517 14TH STREET

City, State Zip: HUNTINGTON BEACH, CA 92647

Phone: (657) 845-4159 Fax: (949) 877-0119

Record ID: 300305AP

Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 12/31/2018 IMS: No

Program Name: SOBER PARTNERS WATERFRONT RECOVERY CENTER

Legal Name: PARTNERS PROJECT INC.

Address: 3101 WEST COAST HIGHWAY, SUITE 200

City, State Zip: NEWPORT BEACH, CA 92663

Phone: (855) 997-2786

Record ID: 300305BP
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: SOBER PARTNERS REEF HOUSE

Legal Name: PARTNERS PROJECT INC.
Address: 302 18TH STREET

City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (855) 997-2786

Record ID: 300305CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 5/31/2018 IMS: No

Program Name: CALIFORNIA COAST DETOX AND REHAB

Legal Name: NDR PACIFIC INC.
Address: 24482 CARACAS STREET
City, State Zip: DANA POINT, CA 92629
Phone: (949) 218-8174

(949) 210-0

Record ID: 300306AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: SHORELINE TREATMENT
Legal Name: PURE LIFE RECOVERY, LLC.
Address: 1 CALLE SALTAMONTES
City, State Zip: SAN CLEMENTE, CA 92673

Phone: (949) 388-7014 Fax: (949) 545-6267

Record ID: 300308BP Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name:FAITH BY THE SEALegal Name:FAITH BY THE SEA, INC.Address:27129 CALLE ARROYO

SUITE 1821

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 542-8480 Fax: (949) 429-3698

Record ID: 300309AP
Service Type: NON
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: MONARCH SHORES

Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC

Address: 34575 CAMINO CAPISTRANO City, State Zip: DANA POINT, CA 92629

Phone: (888) 783-0622 Fax: (949) 429-1845

Record ID: 300311AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: MONARCH SHORES

Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC

Address: 35072 CAMINO CAPISTRANO City, State Zip: DANA POINT, CA 92624

Phone: (949) 276-4095 Fax: (949) 429-1845

Record ID: 300311BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: MONARCH SHORES

Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC

Address: 1564 SKYLINE DRIVE City, State Zip: LAGUNA BEACH, CA 92651

Phone: (949) 698-2249 Fax: (949) 429-1845

Record ID: 300311CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: MONARCH SHORES

Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC

Address: 33762 AVENIDA CALITA

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 698-2249 Fax: (949) 874-5911

Record ID: 300311DP Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: MONARCH SHORES

Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC

Address: 27123 CALLE ARROYO,

2121

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (877) 978-3047

Record ID: 300311EP
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: MONARCH SHORES

Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC

Address: 283 UPLAND DRIVE City, State Zip: LAGUNA BEACH, CA 92651 Phone: (949) 715-9174

Phone: (949) 715-9174 **Record ID:** 300311FP

Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: MONARCH SHORES

Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC

Address: 31422 CEANOTHUS DRIVE City, State Zip: LAGUNA BEACH, CA 92651

Phone: (949) 715-1647

Record ID: 300311HP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: MONARCH SHORES

Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC

Address: 27136 B PASEO ESPADA,

#1121

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (877) 978-3047

Record ID: 300311IP
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: PILLARS RECOVERY, LLC
Legal Name: PILLARS RECOVERY, LLC
Address: 304 MARGUERITE AVENUE
City, State Zip: CORONA DEL MAR, CA 92625

Phone: (949) 610-9360 Fax: (949) 258-5510

Record ID: 300312AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: PILLARS RECOVERY

Legal Name: PILLARS RECOVERY, LLC Address: 28772 TOP OF THE WORLD City, State Zip: LAGUNA BEACH, CA 92651

Phone: (949) 610-9360 Fax: (949) 258-5510

Record ID: 300312BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: PILLARS RECOVERY
Legal Name: PILLARS RECOVERY, LLC
Address: 326 OLD NEWPORT BLVD.
City, State Zip: NEWPORT BEACH, CA 92663

Phone: (949) 610-9360

Record ID: 300312CP
Service Type: NON
Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: SOUTH COAST BEHAVIORAL HEALTH GUESTHOUSE, INC. Legal Name: SOUTH COAST BEHAVIORAL HEALTH GUESTHOUSE, INC

Address: 1958 BALEARIC DRIVE City, State Zip: COSTA MESA, CA 92626

Phone: (310) 422-6744 Fax: (310) 422-6744

Record ID: 300313AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: SOUTH COAST BEHAVIORAL HEALTH GUESTHOUSE, INC. Legal Name: SOUTH COAST BEHAVIORAL HEALTH GUESTHOUSE, INC

Address: 275 E AST WILSON STREET City, State Zip: COSTA MESA, CA 92627

Phone: (310) 422-6744 Fax: (714) 556-0120

Record ID: 300313BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: ADDICTION HEALTH ALLIANCE, LLC
Legal Name: ADDICTION HEALTH ALLIANCE, LLC

Address: 605 AVENIDA LOS FLORES City, State Zip: SAN CLEMENTE, CA 92672

Phone: (513) 280-2714 Fax: (949) 542-3878

Record ID: 300314AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 8/31/2019 IMS: No

Program Name: BEACHSIDE RECOVERY LLC
Legal Name: BEACHSIDE RECOVERY LLC
Address: 24662 SANTA CLARA AVENUE
City, State Zip: DANA POINT, CA 92629

Phone: (949) 531-6457 Fax: (949) 475-5567

Record ID: 300315AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: BEACHSIDE RECOVERY LLC
Legal Name: BEACHSIDE RECOVERY LLC

Address: 16812 RED HILL AVENUE, SUITE A

City, State Zip: IRVINE, CA 92606

Phone: (949) 531-6457 Fax: (949) 475-5567

Record ID: 300315BP

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: BEACHSIDE RECOVERY LLC
Legal Name: BEACHSIDE RECOVERY LLC

Address: 10231 BRIER LANE

City, State Zip: NORTH TUSTIN, CA 92705-1518

Phone: (888) 387-5576 Fax: (949) 258-9303

Record ID: 300315CP
Service Type: RES-DETOX

Resident Capacity: 10 Total Occupancy: 10 Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name:BEACHSIDE RECOVERY LLCLegal Name:BEACHSIDE RECOVERY LLCAddress:15548 SONORA STREETCity, State Zip:TUSTIN, CA 92782

Phone: (949) 877-3657 Fax: (949) 258-9303

Record ID: 300315DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name:BEACHSIDE RECOVERY LLCLegal Name:BEACHSIDE RECOVERY LLCAddress:23671 BRASILIA STREET

City, State Zip: MISSION VIEJO, CA 92691-3047

Phone: (888) 387-5576 Fax: (949) 258-9303

Record ID: 300315EP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name:BEACHSIDE RECOVERY LLCLegal Name:BEACHSIDE RECOVERY LLC

Address: 16490 HARBOR BLVD., SUITES A AND B

City, State Zip: FOUNTAIN VALLEY, CA 92707

Phone: (949) 531-6456

Record ID: 300315FP
Service Type: NON
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: SO CAL TREATMENT
Legal Name: TRINA TIMANUS

Address: 1246 E. TURIN AVENUE
City, State Zip: ANAHEIM, CA 92805
Phone: (714) 381-0432

Record ID: 300317AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: OCEANFRONT RECOVERY

Legal Name: OCEANFRONT RECOVERY AT LAGUNA BEACH, LLC

Address: 900 GLENNEYRE STREET, SUITE T

City, State Zip: LAGUNA BEACH, CA 92651

Phone: (414) 614-7244 Fax: (949) 715-7037

Record ID: 300318AP

Service Type: NON Target Population: 1.2

Expiration Date: 4/30/2019 IMS: No

OCEANFRONT RECOVERY Program Name:

Legal Name: OCEANFRONT RECOVERY AT LAGUNA BEACH, LLC

Address: 30662 MARILYN DRIVE City, State Zip: LAGUNA BEACH, CA 92651

Phone: (949) 681-5100 Fax: (949) 484-2800

Record ID: 300318BP Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.2

Expiration Date: 10/31/2019 IMS: No

Program Name: OCEANFRONT RECOVERY

Legal Name: OCEANFRONT RECOVERY AT LAGUNA BEACH, LLC

Address: 31122 BROOKS STREET City, State Zip: LAGUNA BEACH, CA 92651

(949) 681-5100 Phone: Fax: (949) 484-2800

Record ID: 300318CP Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.2

10/31/2019 TMS: Expiration Date: No

Program Name: OCEANFRONT RECOVERY

OCEANFRONT RECOVERY AT LAGUNA BEACH, LLC Legal Name:

Address: 2575 TEMPLE HILLS DRIVE City, State Zip: LAGUNA BEACH, CA 92651

Phone: (949) 681-5100

Record ID: 300318DP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: OCEANFRONT RECOVERY

Legal Name: OCEANFRONT RECOVERY AT LAGUNA BEACH, LLC

Address: 431 NYES PL.

City, State Zip: LAGUNA BEACH, CA 92651

Phone: (949) 777-4766 Fax: (949) 715-5488

Record ID: 300318EP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: HILLSIDE LAGUNA BEACH

Legal Name: HILLSIDE LAGUNA BEACH LLC Address: 2516 TEMPLE HILLS DRIVE City, State Zip: LAGUNA BEACH, CA 92651

(949) 261-9999 Phone: (310) 445-5743 Fax:

Record ID: 300319AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 5/31/2019 IMS:

ADVANCES IN MENTAL HEALTH AND ADDICTIONS TREATMENT, INC. Program Name:

Legal Name: ADVANCES IN MENTAL HEALTH AND ADDICTIONS TREATMENT, INC.

Address: 18672 FLORIDA STREET, #100 City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (562) 310-3777 Fax: (562) 239-3135

Record ID: 300320AP

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No Program Name: BALBOA RECOVERY
Legal Name: KEVIN CULLEN

Address: 430 31ST STREET, SUITE B City, State Zip: NEWPORT BEACH, CA 92663

Phone: (949) 400-7120 Fax: (949) 675-3359

Record ID: 300322AP
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name:SOUTH SHORES RECOVERYLegal Name:SOUTH SHORES DETOX, LLCAddress:27568 VISTA DE DONSCity, State Zip:DANA POINT, CA 92624

Phone: (949) 218-2347 Fax: (949) 481-7104

Record ID: 300324AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: CASA CAPRI
Legal Name: CASA CAPRI LLC
Address: 2787 BRISTOL STREET
SUITE 215

City, State Zip: COSTA MESA, CA 92626

Phone: (887) 713-2669 Fax: (877) 820-8959

Record ID: 300326AP
Service Type: NON
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: CASA CAPRI RECOVERY

Legal Name: CASA CAPRI LLC

Address: 15964 MT. JACKSON STREET City, State Zip: FOUNTAIN VALLEY, CA 92708

Phone: (877) 836-8090 Fax: (877) 820-8959

Record ID: 300326BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 6/30/2018 IMS: No

Program Name: CASA CAPRI RECOVERY
Legal Name: CASA CAPRI LLC

Address: 166 E. 18TH STREET,

UNITS 1, 2 & 3

City, State Zip: COSTA MESA, CA 92627

Phone: (877) 836-8090 Fax: (877) 820-8959

Record ID: 300326CP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 6/30/2018 IMS: No

Program Name: CASA CAPRI RECOVERY

Legal Name: CASA CAPRI LLC

Address: 10572 MORNING GLORY CIRCLE City, State Zip: FOUNTAIN VALLEY, CA 92708

Phone: (877) 836-8090 Fax: (877) 820-8959

Record ID: 300326DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 6/30/2019 IMS: No

REFLECTIONS RECOVERY CENTER Program Name: Legal Name: REFLECTIONS RECOVERY LLC

Address: 17165 NEWHOPE STREET, SUITE M City, State Zip: FOUNTAIN VALLEY, CA 92708

(714) 708-2966 Phone: (714) 581-8990 Fax:

Record ID: 300327AP Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: TRES VISTAS RECOVERY

Legal Name: PAIN RECOVERY MEDICAL GROUP, INC.

Address: 31642 AVENIDA EVITA

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (844) 900-0444 Fax: (949) 722-0491

Record ID: 300328AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: SOLMAR RETREAT

Legal Name: HOAG NEUROBEHAVIORAL HEALTH, LLC

Address: 1 HOAG DRIVE

City, State Zip: NEWPORT BEACH, CA 92663-4162

Phone: (949) 764-5656 Fax: (949) 764-4242

Record ID: 300329AP

Service Type: RES Resident Capacity: 21 Total Occupancy: 21 Target Population: 1.1

7/31/2019 IMS: Expiration Date: No

Program Name: AFFINITY RECOVERY Legal Name: AFFINITY GROUP LLC Address: 31952 PASEO TERRAZA

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (714) 422-0119 Fax: (888) 276-0605

Record ID: 300330AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 7/31/2019 TMS: Yes

Program Name: AFFINITY RECOVERY Legal Name: AFFINITY GROUP LLC Address: 1911 KINGS ROAD

City, State Zip: NEWPORT BEACH, CA 92663

(949) 321-8151 Fax: (888) 276-0605 Phone:

Record ID: 300330BP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

9/30/2019 IMS: Expiration Date: No

Program Name: AFFINITY RECOVERY Legal Name: AFFINITY GROUP LLC Address: 9 STARLIGHT ISLE

City, State Zip: LADERA RANCH, CA 92694-1467

Phone: (855) 698-7114 Fax: (888) 276-0605

Record ID: 300330CP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

IMS: Expiration Date: 6/30/2018 Yes Program Name: COMPASS RECOVERY

Legal Name: COMPASS RECOVERY, INC.

Address: 3151 AIRWAY AVENUE, F105-B & K203

City, State Zip: COSTA MESA, CA 92626

Phone: (855) 204-7053 Fax: (949) 891-0440

Record ID: 300331AP
Service Type: NON
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: COMPASS RECOVERY

Legal Name: COMPASS RECOVERY, INC. Address: 9431 ALDERBURY STREET City, State Zip: CYPRESS, CA 90630-2855

Phone: (855) 204-7053 Fax: (949) 891-0440

Record ID: 300331BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: COMPASS RECOVERY

Legal Name: COMPASS RECOVERY, INC. Address: 30891 RIVERA PLACE

City, State Zip: LAGUNA NIGUEL, CA 92677-2455

Phone: (855) 204-7053 Fax: (949) 891-0440

Record ID: 300331CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: KOOL LIVING RECOVERY CENTER

Legal Name: KOOL LIVING, INC.

Address: 26421 VIA CALIFORNIA AND 26362 VIA CANON

City, State Zip: CAPISTRANO BEACH, CA 92624

Phone: (949) 542-4032 Fax: (949) 606-9282

Record ID: 300332AP
Service Type: RES-DETOX

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: KOOL LIVING RECOVERY CENTER

Legal Name: KOOL LIVING, INC.
Address: 4014 CALLE BIENVENIDOS
City, State Zip: SAN CLEMENTE, CA 92672

Phone: (949) 481-3826 Fax: (747) 202-0622

Record ID: 300332BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: KOOL LIVING RECOVERY CENTER

Legal Name: KOOL LIVING, INC.
Address: 449 AVENIDA CRESPI
City, State Zip: SAN CLEMENTE, CA 92672

Phone: (818) 671-4294 Fax: (747) 202-0622

Record ID: 300332CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: KOOL LIVING, INC. Legal Name: KOOL LIVING, INC.

226421 CROWN VALLEY PARKWAY, SUITE 200 Address:

City, State Zip: MISSION VIEJO, CA 95691

(747) 202-0622 Phone: (951) 427-4807 Fax:

Record ID: 300332DP Service Type: NON Target Population: 1.1

6/30/2018 Expiration Date: IMS: No

Program Name: THE SOBER SPOT RECOVERY CENTER

SOBER SPOT, LLC, THE Legal Name:

Address: 25241 PASEO DE ALICIA, SUITE 220

City, State Zip: LAGUNA HILLS, CA 92653

Phone: (949) 388-5123 Fax: (949) 485-6337

Record ID: 300333AP Service Type: NON Target Population: 1.1

Expiration Date: 11/30/2019 IMS: No

WHOLE LIFE RECOVERY Program Name:

Legal Name: WHOLE LIFE RECOVERY, LLC

Address: 32122 CAMINO CAPISTRANO SUITE 100 City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 542-8810 Fax: (949) 218-9041

Record ID: 300334AP

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

COASTLINE BREEZE Program Name:

Legal Name: COASTLINE BREEZE DETOX REHAB & RECOVERY

Address: 33952 GRANADA DRIVE City, State Zip: DANA POINT, CA 92629

Phone: (877) 557-9511 Fax: (480) 383-6983

Record ID: 300335AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 10/31/2019 IMS:

LUMINANCE HEALTH GROUP, INC. Program Name: Legal Name: LUMINANCE HEALTH GROUP, INC.

Address: 1804 VIA SAGE

City, State Zip: SAN CLEMENTE, CA 92672

(949) 248-4645 Phone:

Record ID: 300337AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 8/31/2019 IMS: Nο

Program Name: LUMINANCE HEALTH GROUP, INC. Legal Name: LUMINANCE HEALTH GROUP, INC.

21 LENNOX COURT Address:

City, State Zip: LADERA RANCH, CA 92694

Phone: (310) 303-8325 Fax: (949) 203-8555

Record ID: 300337BP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No Program Name: LUMINANCE HEALTH GROUP, INC. Legal Name: LUMINANCE HEALTH GROUP, INC.

27686 MANOR HILL Address:

City, State Zip: LAGUNA NIGUEL, CA 92677

Phone: (310) 303-8325 Fax: (949) 203-8555

Record ID: 300337CP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: LUMINANCE HEALTH GROUP, INC. Legal Name: LUMINANCE HEALTH GROUP, INC.

Address: 29422 CLIPPER WAY

City, State Zip: LAGUNA NIGUEL, CA 92677

Phone: (310) 303-8325 Fax: (949) 203-8555

Record ID: 300337DP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 3/31/2019 TMS: No

Program Name: LUMINANCE HEALTH GROUP, INC. Legal Name: LUMINANCE HEALTH GROUP, INC. Address: 24662 EL CAMINO CAPISTRANO

City, State Zip: DANA POINT, CA 92629

Phone: (310) 303-8325 Fax: (949) 203-8555

Record ID: 300337EP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6

Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

LUMINANCE HEALTH GROUP, INC. Program Name: LUMINANCE HEALTH GROUP, INC. Legal Name:

Address: 27126 B PASEO ESPADA, SUITE 621,622,623

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 351-0905 Fax: (949) 203-8555

Record ID: 300337HP

Service Type: NON Target Population: 1.1

Expiration Date: 8/31/2019 TMS: No

Program Name: SUNRISE RECOVERY CENTER

Legal Name: WECARE LLC

Address: 2525 W. WOODLAND DRIVE City, State Zip: ANAHEIM, CA 92801

(714) 821-1064 (714) 459-7393 Phone: Fax:

Record ID: 300338AP Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: CANYON VIEW TREATMENT CENTER

Legal Name: PULZE RESIDENTIAL CARE GROUP, LLC Address: 1001 & 1005 S. MOUNTVALE COURT

City, State Zip: ANAHEIM, CA 92808 Phone: (951) 922-5338

Record ID: 300341AP Service Type: **RES-DETOX**

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

IMS: Expiration Date: 10/31/2019 No Program Name: A BETTER LIFE RECOVERY

Legal Name: A BETTER LIFE RECOVERY, LLC

27126 PASEO ESPADA, SUITES 1621-1623 Address:

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 313-7444 Fax: (949) 579-2876

Record ID: 300342AP Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

A BETTER LIFE RECOVERY Program Name:

Legal Name: A BETTER LIFE RECOVERY, LLC

Address: 26006 CAMPEON

City, State Zip: LAGUNA NIGUEL, CA 92677

Phone: (714) 316-4630

Record ID: 300342BP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 8
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: A BETTER LIFE RECOVERY

Legal Name: A BETTER LIFE RECOVERY, LLC Address: 24262 SUNNYBROOK CIRCLE City, State Zip: LAKE FOREST, CA 92630

Phone: (714) 316-4630

Record ID: 300342CP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 8 Target Population: 1.1

6/30/2019 Expiration Date: IMS: No

Program Name: CASA GLORIOSA

Legal Name: GLORIOSA MANAGEMENT, LLC 25466 GLORIOSA DRIVE Address: City, State Zip: MISSION VIEJO, CA 92691

Phone: (951) 427-4807 Fax: (949) 305-9054

Record ID: 300345AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 10/31/2017 TMS: No

TURNING POINT TREATMENT CENTER Program Name:

Legal Name: TURNING POINT TREATMENT CENTER, INC.

Address: 28111 SOMERSET STREET City, State Zip: MISSION VIEJO, CA 92692

(949) 215-3775 (949) 215-3776 Phone: Fax:

Record ID: 300346AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 7 Target Population: 1.1

9/30/2019 Expiration Date: IMS: No

Program Name: TURNING POINT TREATMENT CENTER

Legal Name: TURNING POINT TREATMENT CENTER, INC. Address: 24851 VIA SANTA CRUZ

City, State Zip: MISSION VIEJO, CA 92692

(949) 215-0465 Phone: (949) 215-0360 Fax:

Record ID: 300346BP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: IMS: 6/30/2019 No Program Name: FRESH START OF CALIFORNIA
Legal Name: FRESH START OF CALIFORNIA, LLC

Address: 1210 N ROSS STREET City, State Zip: SANTA ANA, CA 92701 Phone: (323) 419-7384

Record ID: 300349AP
Service Type: RES-DETOX

Resident Capacity: 8
Total Occupancy: 10
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: SHEER RECOVERY SERVICES
Legal Name: SHEER RECOVERY, LLC
Address: 32371 CARIBBEAN DRIVE
City, State Zip: DANA POINT, CA 92629-3533

Phone: (714) 658-3773 Fax: (949) 441-7165

Record ID: 300350AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: SHEER RECOVERY SERVICES

Legal Name: SHEER RECOVERY, LLC

Address: 27130 PASEO ESPADA, SUITE A1422, A1423 & A1424

City, State Zip: SAN JUAN CAPISTRANO, CA 92675-6712

Phone: (714) 658-3773 Fax: (949) 441-7165

Record ID: 300350BP
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: SHEER RECOVERY

Legal Name: SHEER RECOVERY, LLC
Address: 24621 AQUILLA DRIVE

City, State Zip: DANA POINT, CA 92629-1042

Phone: (714) 658-3773 Fax: (949) 441-7165

Record ID: 300350CP Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: TRUVIDA RECOVERY
Legal Name: CREST RECOVERY, LLC

Address: 29522 VIA VALVERDE
City, State Zip: LAGUNA NIGUEL, CA 92677

Phone: (949) 283-4679

Record ID: 300351AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: TRUVIDA WELLNESS

Legal Name: CREST RECOVERY, LLC
Address: 23726 BIRTCHER DRIVE
City, State Zip: LAKE FOREST, CA 92630

Phone: (949) 283-4679

Record ID: 300351BP
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name:SOUTH SHORES DETOXLegal Name:SOUTH SHORES DETOX, LLCAddress:32851 BUCCANEER STREETCity, State Zip:DANA POINT, CA 92629

Phone: (949) 388-4019

Record ID: 300352AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: SURVIVORS LLC
Legal Name: SURVIVORS LLC

Address: 2082 SE BRISTOL STREET, SUITE 200

City, State Zip: NEWPORT BEACH, CA 92660

Phone: (957) 256-7698

Record ID: 300354AP
Service Type: NON
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: FIRST CHOICE DETOX
Legal Name: PACIFIC VIEW DETOX LLC
Address: 26411 CHAPARRAL PLACE
City, State Zip: LAGUNA HILLS, CA 92653

Phone: (949) 207-8601 Fax: (949) 207-8601

Record ID: 300355AP
Service Type: RES-DETOX
Resident Capacity: 6

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name:ADDICTION CENTER FOR HEALINGLegal Name:ADDICTION CENTER FOR HEALINGAddress:1651 E 4TH STREET, SUITE 120

City, State Zip: SANTA ANA, CA 92701

Phone: (657) 231-6200 Fax: (949) 835-4181

Record ID: 300357AP Service Type: NON

Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: DUCK HOUSE TREATMENT & RECOVERY

Legal Name: DUCK HOUSE, LLC, THE Address: 952 DAHLIA AVENUE City, State Zip: COSTA MESA, CA 92626

Phone: (657) 266-0623 Fax: (714) 852-5643

Record ID: 300358AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: CAPO CANYON RECOVERY
Legal Name: CAPO CANYON RECOVERY, LLC
Address: 23822 STILLWATER LANE
City, State Zip: LAGUNA NIGUEL, CA 92677

Phone: (800) 804-8714 Fax: (949) 284-8040

Record ID: 300359AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2018 IMS: Yes

Program Name: 417 RECOVERY

Legal Name: 417 SAN CLEMENTE, LLC.

Address: 26010 ACERO,

SUITE 200

City, State Zip: MISSION VIEJO, CA 92691

Phone: (949) 353-5017 Fax: (949) 356-6443

Record ID: 300360AP
Service Type: NON
Target Population: 1.7

Expiration Date: 12/31/2018 IMS: No

Program Name: LAGUNA DETOX
Legal Name: JAWB, LLC.
Address: 226 CLIFF DRIVE

City, State Zip: LAGUNA BEACH, CA 92651

Phone: (310) 946-8143

Record ID: 300361AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: LAGUNA DETOX
Legal Name: JAWB, LLC.

Address: 224 CLIFF DRIVE

City, State Zip: LAGUNA BEACH, CA 92651

Phone: (310) 946-8143

Record ID: 300361BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: OCEAN GROUP, LLC
Legal Name: OCEAN GROUP, LLC
Address: 2305 TEMPLE HILLS DR.
City, State Zip: LAGUNA BEACH, CA 92651

Phone: (619) 871-7345
Record ID: 300363AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6

Total Occupancy: 6
Target Population: 1.8

Expiration Date: 4/30/2019 IMS: No

Program Name: ASPIRE RECOVERY INC. Legal Name: ASPIRE RECOVERY INC.

Address: 16390 PACIFIC COAST HIGHWAY SUITE 200

City, State Zip: HUNTINGTON BEACH, CA 92649

Phone: (800) 467-4106 Fax: (855) 806-9448

Record ID: 300364AP
Service Type: NON

Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: CALIFORNIA PRIME RECOVERY

Legal Name: CALIFORNIA PRIME RECOVERY SERVICES INC

No

Address: 17330 NEWHOPE STREET

SUITE A

City, State Zip: FOUNTAIN VALLEY, CA 92708

Phone: (949) 510-3358

Record ID: 300365AP
Service Type: NON
Target Population: 1.1

Expiration Date: 12/31/2018 IMS:

Program Name: PROTOTYPES' MOTHER AND CHILD RESIDENTIAL HOMES AT THE TUSTIN FAMILY CAMPUS

Legal Name: HEALTHRIGHT 360
Address: 15405 LANSDOWNE ROAD
City, State Zip: TUSTIN, CA 92782

Phone: (714) 566-8433 Fax: (714) 566-8433

Record ID: 300366AN

Service Type: RES Resident Capacity: 15 Total Occupancy: 49 Target Population: 1.4

Expiration Date: 2/28/2019 IMS: No

Program Name: STAR DETOX CENTER

Legal Name: SUBSTANCE TREATMENT ADDICTION RECOVERY DETOX CENTER

Address: 1822 SOUTH BAYLESS STREET

City, State Zip: ANAHEIM, CA 92802

Phone: (844) 557-6237 Fax: (657) 699-3127

Record ID: 300367AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 1/31/2019 IMS: Yes

Program Name: HEALING PATH DETOX Legal Name: HEALING PATH DETOX LLC

Address: 7661 AMBERLEAF CIRCLE (UNIT 1, 2, 3 AND 4)

City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (657) 329-0369

Record ID: 300368AP
Service Type: RES-DETOX

Resident Capacity: 14 Total Occupancy: 14 Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: WAVELENGTHS RECOVERY, LLC
Legal Name: WAVELENGTHS RECOVERY, LLC
Address: 701 HUNTINGTON STREET

City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (714) 442-6668 Fax: (714) 442-2354

Record ID: 300369AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: WAVELENGTHS RECOVERY, LLC
Legal Name: WAVELENGTHS RECOVERY, LLC
Address: 301 MAIN STREET, STE. 201
City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (714) 312-1011 Fax: (714) 442-2354

Record ID: 300369BP

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: WAVELENGTHS RECOVERY, LLC
Legal Name: WAVELENGTHS RECOVERY, LLC
Address: 101 HUNTINGTON STREET
City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (714) 312-1011 Fax: (714) 442-2354

Record ID: 300369CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: WAVELENGTHS RECOVERY, LLC
Legal Name: WAVELENGTHS RECOVERY, LLC
Address: 7761 GARFIELD AVENUE, UNIT 101
City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (714) 375-1178 Fax: (714) 442-2354

Record ID: 300369DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: WAVELENGTHS RECOVERY, LLC
Legal Name: WAVELENGTHS RECOVERY, LLC
Address: 7761 GARFIELD AVENUE, UNIT 2
City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (714) 312-1011 Fax: (714) 442-2354

Record ID: 300369EP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: RISE AGAIN RECOVERY
Legal Name: RISE AGAIN RECOVERY

Address: 20932 BROOKHURST STREET, SUITE 101

City, State Zip: HUNTINGTON BEACH, CA 92646

Phone: (714) 907-1105

Record ID: 300370AP
Service Type: NON
Target Population: 1.8

Expiration Date: 2/28/2019 IMS: No

Program Name: STONERIVER GROUP

Legal Name: STONERIVER GROUP, LLC

Address: 140 AVENIDA ALGODON, UNIT A City, State Zip: SAN CLEMENTE, CA 92672

Phone: (949) 542-8810

Record ID: 300371AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.13

Expiration Date: 6/30/2019 IMS: No

Program Name: SOUTHERN CALIFORNIA SUNRISE RECOVERY CENTER

Legal Name: SOUTHERN CALIFORNIA SUNRISE RECOVERY CENTER, LLC

Address: 30471 VIA ALCAZAR

City, State Zip: LAGUNA NIGUEL, CA 92677

Phone: (714) 232-0649 Fax: (714) 252-0173

Record ID: 300373AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.13

Expiration Date: 12/31/2018 IMS: No

Program Name: SOUTHERN CALIFORNIA SUNRISE RECOVERY CENTER, LLC

Legal Name: SOUTHERN CALIFORNIA SUNRISE RECOVERY CENTER, LLC

Address: 25681 SABINA AVE

City, State Zip: MISSION VIEJO, CA 92691

Phone: (714) 232-0649 Fax: (714) 252-0173

Record ID: 300373BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: SOUTHERN CALIFORNIA SUNRISE RECOVERY CENTER, LLC
Legal Name: SOUTHERN CALIFORNIA SUNRISE RECOVERY CENTER, LLC

Address: 24522 VANESSA DRIVE City, State Zip: MISSION VIEJO, CA 92691

Phone: (714) 232-0649 Fax: (714) 252-0173

Record ID: 300373DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: INSPIRE HEALTH LLC
Legal Name: INSPIRE HEALTH LLC
Address: 25491 SPOTTED PONY LANE
City, State Zip: LAGUNA HILLS, CA 92653
Phone: (714) 470-4265

Record ID: 300374AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: TRUE RECOVERY

Legal Name: TRUE RECOVERY INC.

Address: 20351 SW ACACIA STREET, FL 2

City, State Zip: NEWPORT BEACH, CA 92660

Phone: (844) 744-8783 Fax: (714) 551-9339

Record ID: 300376AP
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: DESTINY RECOVERY CENTER, LLC
Legal Name: DESTINY RECOVERY CENTER, LLC

Address: 23041 AVENIDA DE LA CARLOTA, SUITE 280

City, State Zip: LAGUNA HILLS, CA 92653

Phone: (310) 738-0008
Record ID: 300377AP

Service Type: NON-DETOX

Target Population: 1.5

Expiration Date: 2/28/2019 IMS: No

Program Name: R AND R RECOVERY
Legal Name: R AND R RECOVERY

Address: 4952 WARNER AVE, SUITE 100 City, State Zip: HUNTINGTON BEACH, CA 92649

Phone: (949) 307-6660

Record ID: 300379AP
Service Type: NON
Target Population: 1.7

Expiration Date: 2/28/2019 IMS: No

Program Name: SOLACE HILLS RECOVERY CENTER

Legal Name: CORRAL MANAGEMENT, LLC Address: 20641 RED CORRAL ROAD City, State Zip: LAGUNA HILLS, CA 92653

Phone: (714) 325-1950

Record ID: 300381AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: CLEAR LIFE RECOVERY

Legal Name: KKB HEALTH SOLUTIONS, LLC
Address: 4120 BIRCH STREET, SUITE 121
City, State Zip: NEWPORT BEACH, CA 92660

Phone: (941) 883-1945 Fax: (949) 398-8469

Record ID: 300382AP
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: NEW EXISTENCE
Legal Name: NEW EXISTENCE, LLC

Address: 17050 BUSHARD STREET, SUITE 200

City, State Zip: FOUNTAIN VALLEY, CA 92708

Phone: (714) 375-6626 Fax: (866) 991-3182

Record ID: 300384AP
Service Type: NON
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: NOVATION

Legal Name: NOVATION BEHAVIORAL HEALTH, LLC

Address: 1707 EAST BAY AVENUE City, State Zip: NEWPORT BEACH, CA 92661

Phone: (949) 734-9571 Fax: (888) 411-8786

Record ID: 300385AP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: ANCHORED TIDES RECOVERY
Legal Name: ANCHORED TIDES RECOVERY

Address: 19126 MAGNOLIA STREET, SUITE 101,

City, State Zip: HUNTINGTON BEACH, CA 92646

Phone: (714) 377-7706 Fax: (714) 377-7715

Record ID: 300386AP

Service Type: NON Target Population: 1.7

Expiration Date: 6/30/2019 IMS: No

Program Name: MAINSTAY RECOVERY

Legal Name: MAINSTAY RECOVERY, LLC
Address: 2790 HARBOR BLVD, SUITE 208

City, State Zip: COSTA MESA, CA 92625

Phone: (417) 343-2426

Record ID: 300387AP
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: CALIFORNIA ADDICTION INSTITUTE OF MIND AND MEDICINE

Legal Name: AMERICAN ADDICTION INSTITUTE OF MIND AND MEDICINE

Address: 17662 IRVINE BLVD, SUITE 10

City, State Zip: TUSTIN, CA 92780 Phone: (949) 929-6203

Record ID: 300388AN
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

COASTAL ADDICTION CENTER, INC. Program Name: Legal Name: COASTAL ADDICTION CENTER, INC.

Address: 527 S. ARCHER ST. City, State Zip: ANAHEIM, CA 92804

Phone: (714) 299-1729 Fax: (714) 533-0237

Record ID: 300390AP Service Type: RES-DETOX

Resident Capacity: 6 6 Total Occupancy: Target Population: 1.1

Expiration Date: 10/31/2019 IMS:

Program Name: OCEAN RIDGE TREATMENT AND RECOVERY

Legal Name: HILLTOP WAY, LLC Address: 31881 PEPPERTREE BEND

SAN JUAN CAPISTRANO, CA 92675 City, State Zip:

(949) 545-9540 Phone:

300391AP Record ID: Service Type: **RES-DETOX**

Resident Capacity: 6 6 Total Occupancy: Target Population: 1.1

10/31/2019 IMS: Expiration Date: No

Program Name: DBT CENTER OF ORANGE COUNTY

Legal Name: MICHELE S LOB, LICENSED MARRIAGE AND FAMILY THERAPY,

A PROFESSIONAL CORPORATION

4299 MACARTHUR BOULEVARD, #200 Address:

City, State Zip: NEWPORT BEACH, CA 92660

Phone: (949) 480-7767 Fax: (949) 209-1977

Record ID: 300625AP

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2018

TMS: No

Program Name: **BEGINNINGS**

Legal Name: ELITE CARE, INC. 1991 ANAHEIM AVENUE, Address:

UNIT B

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 954-6135 Record ID: 300626AP

Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: **BEGINNINGS**

Legal Name: ELITE CARE, INC. Address: 1991 ANAHEIM AVENUE,

UNIT A

City, State Zip: COSTA MESA, CA 92627

Phone: (888) 511-0607

Record ID: 300626BP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

BEGINNINGS Program Name:

Legal Name: ELITE CARE, INC. 1991 ANAHEIM AVENUE, Address:

UNIT C

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 397-2250

Record ID: 300626CP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No Program Name:STILL WATERS RECOVERY CENTER, INC.Legal Name:STILL WATERS RECOVERY CENTER, INC.Address:20422 BEACH BOULEVARD, SUITE 235

City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (714) 202-9818 Fax: (714) 242-1363

Record ID: 300627AP
Service Type: NON
Target Population: 1.3

Expiration Date: 2/28/2018 IMS: No

Program Name: LOTUS PLACE RECOVERY
Legal Name: LOTUS PLACE RECOVERY, LLC

16400 HARDON ROLLEYARD OLL

Address: 16480 HARBOR BOULEVARD, SUITE 200

City, State Zip: FOUNTAIN VALLEY, CA 92708

Phone: (714) 884-4408 Fax: (714) 617-4125

Record ID: 300628AP
Service Type: NON
Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: HALO HOUSE

Legal Name: HALO HEALTH SERVICES, INC.

Address: 2421 TUSTIN AVENUE City, State Zip: COSTA MESA, CA 92627

Phone: (949) 307-3216 Record ID: 300629AP

Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: COASTLINE RECOVERY

Legal Name: COASTLINE RECOVERY, LLC

Address: 2102 BUSINESS CENTER DRIVE, SUITE 121

City, State Zip: IRVINE, CA 92612
Phone: (800) 712-9635
Record ID: 300630AP

Record ID: 3006
Service Type: NON
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: COASTLINE BEHAVIORAL HEALTH

Legal Name: COASTLINE RECOVERY, LLC Address: 18377 BEACH BOULEVARD,

209/210

City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (800) 712-9638 Fax: (714) 388-3844

Record ID: 300630BP Service Type: NON

Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: TRUE LIFE RECOVERY

Legal Name: TRUE LIFE RECOVERY, INC. Address: 16832 MAPLE STREET

City, State Zip: FOUNTAIN VALLEY, CA 92708

Phone: (714) 351-7800

Record ID: 300631AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 6/30/2018 IMS: No

Program Name:THE HOUSE OF THE RISING SON, LLCLegal Name:THE HOUSE OF THE RISING SON, LLC

Address: 147 EL LEVANTE

City, State Zip: SAN CLEMENTE, CA 92672

Phone: (503) 793-8919 Fax: (949) 606-8518

Record ID: 300633AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: NATIONWIDE RECOVERY CENTERS

Legal Name: NATIONWIDE RECOVERY CENTERS, LLC

Address: 22602 COSTA BELLA City, State Zip: LAKE FOREST, CA 92630

Phone: (949) 606-5742 Fax: (949) 525-4321

Record ID: 300634AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: LEAD RECOVERY CENTER

Legal Name: HIRED POWER TRANSITIONAL LIVING CENTER, LLC

Address: 3151 AIRWAY AVENUE, F107 City, State Zip: COSTA MESA, CA 92626-4607

Phone: (800) 910-9299 Fax: (888) 870-3174

Record ID: 300635AP

Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: LEAD RECOVERY CENTER

Legal Name: HIRED POWER TRANSITIONAL LIVING CENTER, LLC

Address: 1897 ORANGE AVE., UNIT B City, State Zip: COSTA MESA, CA 92627

Phone: (800) 380-0012 Fax: (888) 870-3174

Record ID: 300635BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 6/30/2019 IMS: No

Program Name: PACIFIC SOLSTICE

Legal Name: PACIFIC SOLSTICE, LLC

Address: 23461 SOUTH POINTE DRIVE, SUITE 340

City, State Zip: LAGUNA HILLS, CA 92653

Phone: (949) 701-0221

Record ID: 300636AP
Service Type: NON
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: SHANTI RECOVERY SERVICES

Legal Name: SHANTI RECOVERY SERVICES, INC.

Address: 31211 CASA GRANDE DRIVE

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

Phone: (949) 294-5104

Record ID: 300637AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name:BROADWAY DETOX CENTERLegal Name:BROADWAY DETOX CENTER, LLC

Address: 6021 JADE CIRCLE

City, State Zip: HUNTINGTON BEACH, CA 92647

Phone: (657) 227-3532 **Record ID:** 300638AP

Record ID: 300638AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: MISSION TREATMENT & RECOVERY

Legal Name: PEPPERTREE MANAGEMENT, LLC

Address: 25352 HILLARY LANE
City, State Zip: LAGUNA HILLS, CA 92653

Phone: (949) 652-5351

Record ID: 300639AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: SUSTAIN RECOVERY

Legal Name: OCTLC, INC.

Address: 125 SOUTH CHAPARRAL COURT, SUITE 200

City, State Zip: ANAHEIM, CA 92808

Phone: (714) 376-5889 Fax: (675) 236-4152

Record ID: 300640AP Service Type: NON

Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: ADVANCED RECOVERY SOLUTION

Legal Name: ADVANCED RECOVERY SOLUTION, LLC.

Address: 3744 N. HERMOSA PLACE City, State Zip: FULLERTON, CA 92835 Phone: (951) 212-0439

Record ID: 300641BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: NEW LIFE TREATMENT CENTER

Legal Name: NEW LIFE TREATMENT CENTER, INC.

Address: 598 PIERPOINT DRIVE City, State Zip: COSTA MESA, CA 92626 Phone: (657) 267-0219

Record ID: 300642AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6

Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: NEW LIFE TREATMENT CENTER

Legal Name: NEW LIFE TREATMENT CENTER, INC. Address: 1940 WEST ORANGEWOOD AVENUE,

#205

City, State Zip: ORANGE, CA 92868 Phone: (626) 644-0070

Record ID: 300642BP
Service Type: NON
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

NEW LIFE TREATMENT CENTER Program Name:

Legal Name: NEW LIFE TREATMENT CENTER, INC. Address: 1764 NORTH MORNINGSIDE STREET

City, State Zip: ORANGE, CA 92867 Phone: (626) 644-0070

Record ID: 300642CP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: MILESTONE DETOX Legal Name: MILESTONE DETOX, LLC Address: 31981 CALLE WINONA

City, State Zip: SAN JUAN CAPISTRANO, CA 92675

RES-DETOX

Phone: (949) 344-8149 Record ID: 300646AP Service Type:

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

6/30/2018 Expiration Date: IMS: No

Program Name: AKUA MIND & BODY

AKUA BEHAVIORAL HEALTH, INC. Legal Name:

Address: 326 UNIVERSITY DRIVE City, State Zip: COSTA MESA, CA 92627

Phone: (949) 279-1376

Record ID: 300647AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.2

Expiration Date: 5/31/2018 IMS: No

Program Name: AKUA MIND & BODY

Legal Name: AKUA BEHAVIORAL HEALTH, INC.

Address: 328 UNIVERSITY DRIVE City, State Zip: COSTA MESA, CA 92627

Phone: (949) 279-1376

Record ID: 300647BP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.3

Expiration Date: 5/31/2018 IMS: No

AKUA MIND & BODY Program Name:

Legal Name: AKUA BEHAVIORAL HEALTH, INC. Address: 319- A UNIVERSITY DR.

City, State Zip: COSTA MESA, CA 92627 Phone: (310) 872-6700

Record ID: 300647CP

Service Type: RES-DETOX Resident Capacity: 6

Total Occupancy: 6 Target Population: 1.1

Expiration Date: 9/25/2019 IMS: No

Program Name: AKUA MIND & BODY

Legal Name: AKUA BEHAVIORAL HEALTH, INC.

Address: 319- B UNIVERSITY DR. City, State Zip: COSTA MESA, CA 92627

Phone: (310) 872-6700

Record ID: 300647DP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 9/25/2019 IMS: No

REALIGN DETOX & RESIDENTIAL TREATMENT CENTER Program Name:

Legal Name: REALIGN DETOX, LLC 29552 CROWN CREEK Address:

City, State Zip: LAGUNA NIGUEL, CA 92677-3951

Phone: (714) 232-0649 Fax: (714) 821-1084

Record ID: 300648AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: ALTUS TREATMENT SERVICES Legal Name: ALTUS TREATMENT CENTRAL, LLC

Address: 145 COLUMBIA, SUITE 200

City, State Zip: ALISO VIEJO, CA 92656

Phone: (949) 521-6138

Record ID: 300650AP Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: ALTUS TREATMENT SERVICES Legal Name: ALTUS TREATMENT CENTRAL, LLC

Address: 25542 RHODA DRIVE

City, State Zip: MISSION VIEJO, CA 92691

Phone: (949) 521-6138 Fax: (949) 521-7926

Record ID: 300650BP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.2

Expiration Date: 10/31/2018 IMS: No

Program Name: ALTUS TREATMENT SERVICES Legal Name: ALTUS TREATMENT CENTRAL, LLC

Address: 24072 CASTILLA LANE City, State Zip: MISSION VIEJO, CA 92691

Phone: (949) 521-6138 Fax: (949) 521-7926

Record ID: 300650CP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.3

Expiration Date: 10/31/2018 TMS: No

Program Name: ALTUS TREATMENT SERVICES Legal Name: ALTUS TREATMENT CENTRAL, LLC

24102 LARKWOOD Address:

City, State Zip: LAKE FOREST, CA 92630

Phone: (949) 521-6138 Record ID: 300650DP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.2

IMS: Expiration Date: 10/31/2018 No

EPIC VICTORY, INC. Program Name: Legal Name: EPIC VICTORY, INC. Address: 23547 MOULTON PARKWAY,

201A & 201B

City, State Zip: LAGUNA HILLS, CA 92653

(949) 583-1516 Phone: (949) 415-9217 Fax:

Record ID: 300651AP Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

12 SOUTH RECOVERY Program Name: Legal Name: 12 SOUTH, LLC 27285 LAS RAMBLAS, Address:

#147

City, State Zip: MISSION VIEJO, CA 92691

Phone: (949) 338-2275

Record ID: 300653AP Service Type: NON Target Population: 1.1

5/31/2018 Expiration Date: IMS: No

BEACH CITY TREATMENT Program Name: Legal Name: BEACH CITY TREATMENT, LLC

Address: 421 11TH STREET

City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (714) 726-8652

Record ID: 300654AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 1.1 Target Population:

Expiration Date: 6/30/2018 IMS: No

Program Name: BEACH CITY TREATMENT

Legal Name: BEACH CITY TREATMENT, LLC Address: 30461 PUERTO VALLARTA City, State Zip: LAGUNA NIGUEL, CA 92677

Phone: (714) 726-8652

Record ID: 300654BP Service Type: RES-DETOX

Resident Capacity: Total Occupancy: 6 Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

FRESH START RECOVERY SERVICES Program Name:

Legal Name: FRESH START, LLC Address:

2790 HARBOR BOULEVARD,

SUITE 307 & 309

City, State Zip: COSTA MESA, CA 92627

Phone: (949) 295-2888

Record ID: 300655AP Service Type: NON

Target Population: 1.1

Expiration Date: 6/30/2018 TMS: No

BRIDGES TO LIFE DETOX Program Name: Legal Name: DAMASCUS ROAD, LLC

Address: 1313 NORTH BROOKHURST STREET

City, State Zip: ANAHEIM, CA 92801

Phone: (714) 232-0649 Fax: (714) 252-0173

Record ID: 300656AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

7/31/2018 Expiration Date: IMS: No

Program Name: GUARDIAN HEALTH CARE

GUARDIAN HEALTH CARE SERVICES, INC. Legal Name:

Address: 1055 CHEYENNE STREET City, State Zip: COSTA MESA, CA 92626

Phone: (657) 245-3991 Record ID: 300658AP

Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

IMS: Expiration Date: 10/31/2018

Program Name: GUARDIAN HEALTH CARE

Legal Name: GUARDIAN HEALTH CARE SERVICES, INC.

Address: 2534 SOUTH DEEGAN DRIVE City, State Zip: SANTA ANA, CA 92704

Phone: (714) 852-3074 **Record ID:** 300658BP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

RES-DETOX

Program Name: RISING ROADS RECOVERY SERVICES FOR WOMEN, LLC
Legal Name: RISING ROADS RECOVERY SERVICES FOR WOMEN, LLC

Address: 10905 EL DOMINO AVENUE City, State Zip: FOUNTAIN VALLEY, CA 92708

Phone: (714) 673-9007

Record ID: 300659AP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 7/31/2018 IMS: No

Program Name: RISING ROADS RECOVERY SERVICES FOR WOMEN, LLC Legal Name: RISING ROADS RECOVERY SERVICES FOR WOMEN, LLC

Address: 180

NEWPORT CENTER DRIVE #255

City, State Zip: NEWPORT BEACH, CA 92660

Phone: (866) 746-1558 Fax: (714) 786-8986

Record ID: 300659BP
Service Type: NON
Target Population: 1.3

Expiration Date: 9/30/2019 IMS: No

Program Name:LANDMARKRECOVERYCENTERLegal Name:LANDMARKRECOVERYLLC.Address:23265SOUTHPOINTEDRIVE,

101

City, State Zip: LAGUNA HILLS, CA 92653

Phone: (888) 792-9170 Fax: (888) 792-2681

Record ID: 300660AP

Service Type: NON

Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name:THE WELL RECOVERY PARTNERSLegal Name:THE WELL RECOVERY PARTNERS

Address: 5282 CORNELL AVENUE City, State Zip: WESTMINSTER, CA 92683

Phone: (714) 316-8100

Record ID: 300662AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: THE WELL RECOVERY PARTNERS
Legal Name: THE WELL RECOVERY PARTNERS

Address: 603 LAKE STREET

City, State Zip: HUNTINGTON BEACH, CA 92648

Phone: (714) 316-8100

Record ID: 300662BP Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: SAFE AND SOUND TREATMENT, LLC Legal Name: SAFE AND SOUND TREATMENT, LLC

Address: 799 W 19TH STREET,

UNIT G

City, State Zip: COSTA MESA, CA 92627

Phone: (714) 454-7502

Record ID: 300666AP
Service Type: NON
Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: SATORI RECOVERY CENTER
Legal Name: SATORI RECOVERY CENTER, LLC

Address: 2760 PARK AVENUE

City, State Zip: LAGUNA BEACH, CA 92651 Phone: (626) 825-8805

Record ID: 300667AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name:SATORI RECOVERY CENTERLegal Name:SATORI RECOVERY CENTER, LLCAddress:26142 BUENA VISTA COURTCity, State Zip:LAGUNA HILLS, CA 92653

Phone: (626) 825-8805

Record ID: 300667BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: NARCONON HUNTINGTON HARBOR HOUSE

Legal Name: NARCONON FRESH START
Address: 17123 ROUNDHILL DRIVE

City, State Zip: HUNTINGTON BEACH, CA 92649

Phone: (949) 675-8988 Fax: (888) 680-2730

Record ID: 300668AN
Service Type: RES-DETOX
Resident Capacity: 6

Resident Capacity: 6
Total Occupancy: 10
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: THE EDGE, LLC
Legal Name: THE EDGE, LLC
Address: 26060 ACERO
SUITE 124

City, State Zip: MISSION VIEJO, CA 92691

Phone: (949) 340-7762

Record ID: 300669AP
Service Type: NON
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

State of California, Department of Health Care Services Licensed Residential Facilities and/or Certified Alcohol and Drug Programs

As of 11/1/2017

Placer County

Program Name: PLACER COUNTY ALCOHOL AND OTHER DRUG TREATMENT PROGRAM

COUNTY OF PLACER, DEPARTMENT OF HEALTH & HUMAN SERVICES, Legal Name:

ADULT SYSTEM OF CARE

Address: 11512 B AVENUE City, State Zip: AUBURN, CA 95603

(530) 889-7240 Phone: Fax: (530) 889-7293

Record ID: 310002BN

Service Type: NON Target Population: 1.8

Expiration Date: IMS: 11/30/2017 No

NEW LEAF COUNSELING SERVICES

Program Name: Legal Name: Legal Name: JAMES HARDWICK Address: 1254 HIGH STREET City, State Zip: AUBURN, CA 95603-5015

Phone: (530) 889-9195 Fax: (530) 889-9197

Record ID: 310007AP

Service Type: NON Target Population: 1.3

Expiration Date: 2/28/2020 TMS: No

Program Name: HOPE HELP AND HEALING
Legal Name: HOPE HELP AND HEALING
Address: 11960 HERITAGE OAK PLA

11960 HERITAGE OAK PLACE, SUITE 20

City, State Zip: AUBURN, CA 95603-2403

Phone: (530) 885-4249 Fax: (530) 885-6191

Record ID: 310010CN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: TRUE STEP
Legal Name: HOPE HELP AND HEALING
Address: 318 LINCOLN WAY, #B City, State Zip: AUBURN, CA 95603

Phone: (530) 392-0432 Fax: (530) 885-6191

Record ID: 310010DN

Service Type: RES Resident Capacity: 6 Total Occupancy: 7 Target Population: 1.2

Expiration Date: 9/30/2018 TMS: Nο

Program Name: KOINONIA GROUP HOME #1 KOINONIA FOSTER HOMES, INC.

Legal Name: Address: 3880 OAK TREE LANE City, State Zip: LOOMIS, CA 95650-9316

Phone: (916) 652-6557 Fax: (916) 652-8930

Record ID: 310012AN Service Type: DSS Target Population: 1.5

11/30/2018 TMS: Expiration Date: No

KOINONIA GROUP HOME #2 Program Name: Legal Name: KOINONIA FOSTER HOMES, INC.

Address: 6331 KING ROAD

City, State Zip: LOOMIS, CA 95650-8801

Phone: (916) 652-3842 Fax: (916) 652-9586

Record ID: 310012BN Service Type: DSS

Target Population: 1.5

Expiration Date: 11/30/2018 IMS: No Program Name: KOINONIA GROUP HOME #3
Legal Name: KOINONIA FOSTER HOMES, INC.

Address: 5440 PARAGON STREET City, State Zip: ROCKLIN, CA 95677-2217

Phone: (916) 624-2636 Fax: (916) 624-2069

Record ID: 310012CN
Service Type: DSS
Target Population: 1.5

Expiration Date: 11/30/2018 IMS: No

Program Name: KOINONIA GROUP HOME #4
Legal Name: KOINONIA FOSTER HOMES, INC.

Address: 8200 KING ROAD

City, State Zip: LOOMIS, CA 95650-8813

Phone: (916) 652-0516 Fax: (916) 652-4237

Record ID: 310012DN
Service Type: DSS
Target Population: 1.5

Expiration Date: 11/30/2018 IMS: No

Program Name: AUBURN CAMPUS-OUTPATIENT PROGRAM

Legal Name: COMMUNITY RECOVERY RESOURCES

Address: 12183 LOCKSLEY LANE,

SUITE 101, 102, 103 & 104

City, State Zip: AUBURN, CA 95602-2050

Phone: (530) 885-1961 Fax: (916) 797-8979

Record ID: 310019AN

Service Type: NON

Target Population: 1.4

Expiration Date: 9/30/2019 IMS: No

Program Name: AUBURN CAMPUS RESIDENTIAL PROGRAM

Legal Name: COMMUNITY RECOVERY RESOURCES

Address: 12125 SHALE RIDGE ROAD

City, State Zip: AUBURN, CA 95602

Phone: (530) 885-1917 Fax: (530) 273-7740

Record ID: 310019BN
Service Type: RES-DETOX

Resident Capacity: 28
Total Occupancy: 28
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: LINCOLN SERVICE CENTER

Legal Name: COMMUNITY RECOVERY RESOURCES
Address: 1530 3RD STREET, SUITE 212
City, State Zip: LINCOLN, CA 95648-2500

Phone: (916) 434-8927 Fax: (916) 434-0678

Record ID: 310019CN

Service Type: NON Target Population: 1.9

Expiration Date: 5/31/2019 IMS: No

Program Name: ROSEVILLE CAMPUS

Legal Name: COMMUNITY RECOVERY RESOURCES

Address: 730 SUNRISE AVENUE, SUITES 201, 250, 260, 261, & 271

City, State Zip: ROSEVILLE, CA 95661-4553

Phone: (916) 782-3737 Fax: (916) 782-3739

Record ID: 310019EN

Service Type: NON Target Population: 1.9

Expiration Date: 5/31/2019 IMS: No

Program Name: SIERRA NATIVE ALLIANCE - WHITE BISON PROGRAM (WE Legal Name: NATIVE ALLIANCE OF THE SIERRA NEVADA FOOTHILLS Address: 610 AUBURN RAVINE ROAD, SUITE G & F Program Name: SIERRA NATIVE ALLIANCE - WHITE BISON PROGRAM (WBP)

City, State Zip: AUBURN, CA 95603-3930

(530) 888-8767 Fax: (530) 888-8757 Phone:

Record ID: 310020AN

Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

NEW LEAF COUNSELING SERVICES HOFFMAN HOUSE Program Name:

NEW LEAF COUNSELLES JAMES N HARDWICK 199 HOFFMAN AVENUE Legal Name: Address: City, State Zip: AUBURN, CA 95603

(530) 885-9067 Fax: (530) 885-2534 Phone:

Record ID: 310022AP

Service Type: RES Resident Capacity: 9 Total Occupancy: 15
Target Population: 1.4

5/31/2019 IMS: Expiration Date: No

State of California, Department of Health Care Services Licensed Residential Facilities and/or Certified Alcohol and Drug Programs

As of 11/1/2017 Plumas County

No licensed or certified facilities at this time.

Please check with a neighboring county for services.

State of California, Department of Health Care Services Licensed Residential Facilities and/or Certified Alcohol and Drug Programs

As of 11/1/2017

Riverside County

Program Name: EMBRACE RECOVERY LLC
Legal Name: EMBRACE RECOVERY LLC
Address: 20263 WENDY LANE
City, State Zip: MURRIETA, CA 92562

Phone: (951) 223-4695 Fax: (951) 929-2780

Record ID: 300362BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.8

Expiration Date: 7/31/2019 IMS: No

Program Name: ABC RECOVERY CENTERS

Legal Name: A.B.C. RECOVERY CENTER, INC.

Address: 44374 PALM STREET AND 44435 BISKRA STREET

City, State Zip: INDIO, CA 92201

Phone: (760) 342-6616 Fax: (760) 347-8276

Record ID: 330001AN Service Type: RES-DETOX

Resident Capacity: 75 Total Occupancy: 75 Target Population: 1.9

Expiration Date: 6/30/2018 IMS: No

Program Name: ABC RECOVERY CENTER OUTPATIENT PROGRAM

Legal Name: A.B.C. RECOVERY CENTER, INC.

Address: 82353 INDIO BLVD. City, State Zip: INDIO, CA 92201

Phone: (760) 342-6616 Fax: (760) 347-8276

Record ID: 330001BN Service Type: NON

Service Type: NON Target Population: 1.5

Expiration Date: 7/31/2019 IMS: No

Program Name: THE RANCH

Legal Name: THE RANCH RECOVERY CENTERS, INC.

Address: 7885 ANNANDALE AVENUE

City, State Zip: DESERT HOT SPRINGS, CA 92240-1419

Phone: (760) 329-2924 **Record ID: 330003AN**Service Type: RES-DETOX

Resident Capacity: 46
Total Occupancy: 46
Target Population: 1.2

Expiration Date: 6/30/2018 IMS: Yes

Program Name: HACIENDA VALDEZ

Legal Name: THE RANCH RECOVERY CENTERS, INC.

Address: 12890 QUINTA WAY

City, State Zip: DESERT HOT SPRINGS, CA 92240-4852

Phone: (760) 329-2959 Fax: (760) 329-2953

Record ID: 330003BN Service Type: RES-DETOX

Resident Capacity: 35
Total Occupancy: 35
Target Population: 1.3

Expiration Date: 6/30/2018 IMS: Yes

Program Name: MEN'S SUBSTANCE ABUSE RECOVERY HOME

Legal Name: WHITESIDE MANOR

Address: 2709, 2743 & 2759 ORANGE STREET

City, State Zip: RIVERSIDE, CA 92501

Phone: (951) 686-9454 Fax: (951) 686-2303

Record ID: 330004AN
Service Type: RES-DETOX

Resident Capacity: 32 Total Occupancy: 32 Target Population: 1.2

Expiration Date: 5/31/2018 IMS: Yes

Program Name: WILSHIRE HOUSE
Legal Name: WHITESIDE MANOR

Address: 2452 AND 2456 WILSHIRE STREET

City, State Zip: RIVERSIDE, CA 92501

Phone: (951) 682-6631 Fax: (951) 686-2303

Record ID: 330004TN
Service Type: RES-DETOX

Resident Capacity: 14 Total Occupancy: 14 Target Population: 1.3

Expiration Date: 11/30/2018 IMS: Yes

Program Name: PALM AVENUE WOMEN'S PROGRAM

Legal Name: WHITESIDE MANOR
Address: 4750 PALM AVENUE
City, State Zip: RIVERSIDE, CA 92501

Phone: (951) 686-0021 Fax: (951) 686-2303

Record ID: 330004WN
Service Type: RES-DETOX

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.3

Expiration Date: 10/31/2019 IMS: Yes

Program Name: OMEGA/ BETA PROGRAM LAKE ELSINORE

Legal Name: RIVERSIDE RECOVERY RESOURCES
Address: 600 THIRD STREET, SUITE C
City, State Zip: LAKE ELSINORE, CA 92530

Phone: (951) 674-5354 Fax: (951) 674-5227

Record ID: 3300090N

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: TIME TO CHANGE RECOVERY

Legal Name: TTC RECOVERY, INC.
Address: 29204 SHIPWRIGHT DRIVE
City, State Zip: MENIFEE, CA 92585
Phone: (888) 948-1468

Record ID: 330010AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: MFI WOODCREST RECOVERY CENTER

Legal Name: MFI RECOVERY CENTER
Address: 17270 ROOSEVELT STREET
City, State Zip: RIVERSIDE, CA 92508

Phone: (951) 683-6596 Fax: (951) 351-1554

Record ID: 330013AN Service Type: RES-DETOX

Resident Capacity: 56
Total Occupancy: 56
Target Population: 1.2

Expiration Date: 11/30/2019 IMS: No

Program Name: A WOMAN'S PLACE Legal Name: MFI RECOVERY CENTER Address: 4295 BROCKTON AVENUE City, State Zip: RIVERSIDE, CA 92501

(951) 351-1554 Phone: (951) 683-6596 Fax:

Record ID: 330013GN RES-DETOX Service Type:

Resident Capacity: 38 Total Occupancy: 64 Target Population: 1.4

Expiration Date: 7/31/2019 IMS: Yes

Program Name: MFI RECOVERY CENTER Legal Name: MFI RECOVERY CENTER Address: 5870 ARLINGTON AVENUE City, State Zip: RIVERSIDE, CA 92504

(951) 351-1554 Phone: (951) 683-6596 Fax:

Record ID: 330013IN Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

MFI RECOVERY CENTER Program Name: Legal Name: MFI RECOVERY CENTER

Address: 1035 WEST RAMSEY STREET, SUITE A

City, State Zip: BANNING, CA 92220

Phone: (951) 683-6596 Fax: (951) 351-1554

Record ID: 330013JN Service Type: NON

Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

MFI RECOVERY CENTER Program Name: Legal Name: MFI RECOVERY CENTER

Address: 4440 UNIVERSITY AVENUE, UNIT 2, 3, 4, 5, 7, 8, 9, 11, 12 & 13

RIVERSIDE, CA 92501 City, State Zip:

(951) 683-6596 Phone: Fax: (951) 351-1554

Record ID: 330013KN RES-DETOX Service Type: 33

Resident Capacity: Total Occupancy: 33 Target Population: 1.2

8/31/2019 Expiration Date: IMS: Yes

Program Name: VALLEY-WIDE COUNSELING SERVICES

Legal Name: MFI RECOVERY CENTER

1604 SOUTH SANTA FE AVENUE, SUITE 403 Address:

City, State Zip: SAN JACINTO, CA 92583

Phone: (951) 683-6596 (951) 351-1554 Fax:

Record ID: 330013QN

Service Type: NON Target Population: 1.1

6/30/2019 Expiration Date: TMS: No

Program Name: MFI RECOVERY CENTER Legal Name: MFI RECOVERY CENTER

24885 WHITEWOOD ROAD, #105 Address:

MURRIETA, CA 92563 City, State Zip:

Phone: (951) 683-6596 Fax: (951) 351-1554

Record ID: 330013RN

Service Type: NON Target Population: 1.5

7/31/2019 Expiration Date: IMS: No

LA VISTA, A PROGRAM OF MFI RECOVERY CENTER Program Name:

Legal Name: MFI RECOVERY CENTER

2220 GIRARD STREET, BLDG. A & B & 294 E. MIDWAY AVENUE Address:

City, State Zip: SAN JACINTO, CA 92583

Phone: (951) 925-8450 Fax: (951) 658-6686

Record ID: 330013sN Service Type: RES-DETOX

Resident Capacity: 29 Total Occupancy: 29 Target Population: 1.3

Expiration Date: 10/31/2018 IMS: No

Program Name: MICHAEL'S HOUSE

Legal Name: PALM SPRINGS TREATMENT CENTERS, LLC

Address: 430 SOUTH CAHUILLA ROAD City, State Zip: PALM SPRINGS, CA 92262

(760) 416-7951 Phone:

Record ID: 330014BP Service Type: RES-DETOX

Resident Capacity: Total Occupancy: 30 Target Population: 1.1

Expiration Date: 8/31/2018 TMS: Nο

Program Name: PALM SPRINGS SERENITY RETREAT

Legal Name: PALM SPRINGS TREATMENT CENTERS, LLC

2095 NORTH INDIAN CANYON DRIVE Address:

City, State Zip: PALM SPRINGS, CA 92262

Phone: (760) 416-7951 Fax: (760) 416-1330

Record ID: 330014CP Service Type: RES-DETOX

Resident Capacity: 30 Total Occupancy: 30 Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

MICHAEL'S HOUSE Program Name:

Legal Name: PALM SPRINGS TREATMENT CENTERS, LLC

1910 SOUTH CAMINO REAL Address: City, State Zip: PALM SPRINGS, CA 92264

Phone: (760) 320-3433

Record ID: 330014DP Service Type: RES-DETOX

Resident Capacity: 60 Total Occupancy: 110 Target Population: 1.1

Expiration Date: 3/31/2018 IMS:

MICHAEL'S HOUSE OUTPATIENT CENTER Program Name:

Legal Name: PALM SPRINGS TREATMENT CENTERS, LLC Address: 515 NORTH PALM CANYON DRIVE, BUILDING H

City, State Zip: PALM SPRINGS, CA 92262

(760) 318-1010 Fax: Phone: (760) 325-0112

Record ID: 330014EP

Service Type: NON Target Population: 1.8

11/30/2018 IMS: Expiration Date: No

Program Name: SOROPTIMIST HOUSE OF HOPE #1 Legal Name: SOROPTIMIST HOUSE OF HOPE, INC.

Address: 13525 CIELO AZUL WAY

City, State Zip: DESERT HOT SPRINGS, CA 92240

Phone: (760) 329-4673 Fax: (760) 329-7311

Record ID: 330016AN

Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.3

IMS: Expiration Date: 2/28/2018 No Program Name: METCALF RECOVERY RANCH

Legal Name: VARP, INC.

Address: 9826 18TH AVENUE City, State Zip: BLYTHE, CA 92225

Phone: (760) 922-8625 Fax: (760) 922-6717

Record ID: 330020AN

Service Type: RES
Resident Capacity: 20
Total Occupancy: 20
Target Population: 1.2

Expiration Date: 6/30/2018 IMS: No

Program Name: SAN JACINTO SAPT
Legal Name: COUNTY OF RIVERSIDE

Address: 1370 S. STATE STREET, SUITE A

City, State Zip: SAN JACINTO, CA 92583

Phone: (951) 791-3350 Fax: (951) 791-3353

Record ID: 330023BN
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: RIVERSIDE SAPT

Legal Name: COUNTY OF RIVERSIDE Address: 2085 RUSTIN AVENUE City, State Zip: RIVERSIDE, CA 92507

Phone: (951) 955-2105 Fax: (951) 955-8060

Record ID: 330023CN

Service Type: NON

Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: CORONA SAPT

Legal Name: COUNTY OF RIVERSIDE

Address: 623 NORTH MAIN STREET, SUITE D-11

City, State Zip: CORONA, CA 92880 Phone: (951) 737-2962

Record ID: 330023DN
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: RIVERSIDE COUNTY SUBSTANCE ABUSE PROGRAM

Legal Name: COUNTY OF RIVERSIDE

Address: 83-912 AVENUE 45, SUITE 9

City, State Zip: INDIO, CA 92201

Phone: (760) 347-0754 Fax: (760) 347-8507

Record ID: 330023EN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: BLYTHE SAPT

Legal Name: COUNTY OF RIVERSIDE
Address: 1297 WEST HOBSON WAY
City, State Zip: BLYTHE, CA 92225-1423

Phone: (760) 921-5000 Fax: (760) 921-5002

Record ID: 330023FN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: CATHEDRAL CITY SAPT
Legal Name: COUNTY OF RIVERSIDE

Address: 68-615 PEREZ ROAD, SUITE 3A, 4A, 5A, 6A AND 7A

City, State Zip: CATHEDRAL CITY, CA 92234

Phone: (760) 770-2213 Fax: (760) 770-2240

Record ID: 330023HN
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: HILL ALCOHOL & DRUG TREATMENT

Legal Name: COMMUNITY SOLUTIONS, INC.

Address: 41877 NORTH ENTERPRISE CIRCLE, #100

City, State Zip: TEMECULA, CA 92590

Phone: (951) 719-3685 Fax: (951) 719-3684

Record ID: 330032BP
Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: CASA LAS PALMAS RECOVERY HOME

Legal Name: RIVERSIDE COUNTY LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES, INC.

Address: 83844 HOPI AVENUE City, State Zip: INDIO, CA 92203 Phone: (760) 347-9442

Record ID: 330037AN
Service Type: RES
Resident Capacity: 7
Total Occupancy: 7
Target Population: 1.2

Expiration Date: 7/31/2018 IMS: No

Program Name: CASA CECILIA RECOVERY HOME

Legal Name: RIVERSIDE COUNTY LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES, INC.

Address: 83885 ROSA AVENUE City, State Zip: THERMAL, CA 92274

Phone: (760) 398-2008 Fax: (760) 342-8022

Record ID: 330037BN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.3

Expiration Date: 5/31/2018 IMS: No

Program Name: RIVERSIDE COUNTY LATINO COMMISSION COUNSELING CENTER

Legal Name: RIVERSIDE COUNTY LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES, INC.

Address: 1612 FIRST STREET
City, State Zip: COACHELLA, CA 92236

Phone: (760) 398-9000 Fax: (760) 398-9790

Record ID: 330037DN

Service Type: NON Target Population: 1.5

Expiration Date: 2/28/2019 IMS: No

Program Name: PERRIS VALLEY RECOVERY PROGRAMS, INC.
Legal Name: PERRIS VALLEY RECOVERY PROGRAMS, INC.

Address: 236 E. THIRD STREET,

В

City, State Zip: PERRIS, CA 92570

Phone: (951) 657-2960 Fax: (951) 940-4600

Record ID: 330038BN

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: 10 ACRE RANCH, INC.
Legal Name: 10 ACRE RANCH, INC.
Address: 5953 GRAND AVENUE
City, State Zip: RIVERSIDE, CA 92504

Phone: (951) 784-7081 Fax: (951) 784-7084

Record ID: 330042BN
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 10/31/2017 IMS: No

Program Name: 10 ACRE RANCH, INC.
Legal Name: 10 ACRE RANCH, INC.
Address: 4175 BROCKTON AVENUE
City, State Zip: RIVERSIDE, CA 92501-1369

Phone: (951) 394-8108 Fax: (951) 394-8109

Record ID: 330042CN
Service Type: NON
Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: 10 ACRE RANCH

Legal Name: 10 ACRE RANCH, INC.

Address: 5919,5925,5929,5935, 5935 1/2 CHALLEN AVE.

City, State Zip: RIVERSIDE, CA 92503 Phone: (951) 905-8435

Record ID: 330042DN
Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: 10 ACRE RANCH

Legal Name: 10 ACRE RANCH, INC.
Address: 8605,8567,8589 JANET ST.
City, State Zip: RIVERSIDE, CA 92503
Phone: (951) 772-0694

Record ID: 330042EN
Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.2

Expiration Date: 10/31/2019 IMS: No

Program Name: THE HIGH ROAD PROGRAM Legal Name: THE HIGH ROAD PROGRAM

Address: 3579 ARLINGTON AVENUE, SUITE 200

City, State Zip: RIVERSIDE, CA 92506

Phone: (951) 781-6762 Fax: (951) 781-6249

Record ID: 330050AN

Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: THE AWARENESS PROGRAM
Legal Name: AWARENESS PROGRAM, INC.
Address: 45926 OASIS STREET
City, State Zip: INDIO, CA 92201

Phone: (760) 342-1233 Fax: (760) 342-5344

Record ID: 330051AP

Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: SUNRISE RECOVERY RANCH

Legal Name: SOBER LIVING BY THE SEA, INC. Address: 6690 LIMONITE FRONTAGE ROAD

City, State Zip: RIVERSIDE, CA 92509

Phone: (951) 328-0146 Fax: (949) 675-4285

Record ID: 330056BP
Service Type: RES-DETOX

Resident Capacity: 13 Total Occupancy: 13 Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: SUNRISE RECOVERY RANCH

Legal Name: SOBER LIVING BY THE SEA, INC. Address: 6798 LIMONITE FRONTAGE ROAD

City, State Zip: RIVERSIDE, CA 92509

Phone: (951) 328-0146 Fax: (949) 675-4285

Record ID: 330056CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: SUNRISE RECOVERY RANCH

Legal Name: SOBER LIVING BY THE SEA, INC. Address: 6770 LIMONITE FRONTAGE ROAD

City, State Zip: RIVERSIDE, CA 92509

Phone: (951) 328-0146 Fax: (949) 675-4285

Record ID: 330056DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: THE WYLIE CENTER

Legal Name: THE CAROLYN E. WYLIE CENTER FOR CHILDREN, YOUTH & FAMILIES

Address: 4164 BROCKTON AVENUE City, State Zip: RIVERSIDE, CA 92501

Phone: (951) 683-5193 Fax: (909) 683-6019

Record ID: 330065AN Service Type: NON

Target Population: 1.4

Expiration Date: 2/28/2018 IMS: No

Program Name: U. S. VETS SUBSTANCE ABUSE TREATMENT PROGRAM/VETERANS IN PROGRESS I

Legal Name: UNITED STATES VETERANS INITIATIVE Address: 15105 6TH STREET, ROOMS 323-326

City, State Zip: MARCH ARB, CA 92518

Phone: (951) 999-9120 Fax: (951) 656-6890

Record ID: 330075AN

Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.2

Expiration Date: 11/30/2017 IMS: No

Program Name: TEMECULA VALLEY TREATMENT CENTER

Legal Name: WCHS, INC.

Address: 40700 CALIFORNIA OAKS ROAD, SUITES 201, 202 AND 203

City, State Zip: MURRIETA, CA 92562

Phone: (951) 894-5072 Fax: (951) 894-7324

Record ID: 330081AP
Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: DESERT TREATMENT CLINIC

Legal Name: WCHS, INC.

Address: 1330 NORTH INDIAN CANYON DRIVE, SUITES A, B AND C

City, State Zip: PALM SPRINGS, CA 92262

Phone: (760) 322-9065 Fax: (760) 322-8916

Record ID: 330081CP
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: RIVERSIDE TREATMENT CENTER

Legal Name: WCHS, INC.

Address: 1021 WEST LA CADENA City, State Zip: RIVERSIDE, CA 92501

Phone: (951) 784-8010 Fax: (951) 784-2859

Record ID: 330081DP
Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: SPENCER RECOVERY CENTERS

Legal Name: SPENCER RECOVERY CENTERS, INC. Address: 1276 NORTH PALM CANYON DRIVE, #204

City, State Zip: PALM SPRINGS, CA 92262

Phone: (760) 778-4876 Fax: (949) 313-5240

Record ID: 330086AP

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: PALM SPRINGS RECOVERY

Legal Name: SPENCER RECOVERY CENTERS, INC. Address: 1404 NORTH PALM CANYON DRIVE

City, State Zip: PALM SPRINGS, CA 92262

Phone: (949) 376-3705 Fax: (949) 376-6862

Record ID: 330086BP

Service Type: RES
Resident Capacity: 32
Total Occupancy: 32
Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: RANCH CREEK RECOVERY

Legal Name: RANCH CREEK RECOVERY, INC.

Address: 25650 BASS POINT City, State Zip: MURRIETA, CA 92592

Phone: (951) 676-9111 Fax: (951) 571-4841

Record ID: 330100AP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: RANCH CREEK RECOVERY OUTPATIENT

Legal Name: RANCH CREEK RECOVERY, INC. Address: 43264 BUSINESS PARK DRIVE #101

City, State Zip: TEMECULA, CA 92590

Phone: (951) 696-9200 Fax: (951) 695-9366

Record ID: 330100BP

Service Type: NON
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: PHYSICIANS FOR HEALTHY HOSPITALS, INC. / HEMET VALLEY RECOVERY CENTER

Legal Name: PHYSICIANS FOR HEALTHY HOSPITALS, INC.

Address: 371 NORTH WESTON PLACE

City, State Zip: HEMET, CA 92543

Phone: (951) 765-4900 Fax: (951) 765-4764

Record ID: 330101AP
Service Type: RES

Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: SOUTHERN CALIFORNIA DETOX

Legal Name: SOUTHERN CALIFORNIA DETOX TREATMENT AND RECOVERY LLC.

Address: 42012 DAHLIA WAY
City, State Zip: TEMECULA, CA 92591
Phone: (714) 854-2026

Record ID: 330105AP
Service Type: RES-DETOX

Resident Capacity: 4
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: SOUTHERN CALIFORNIA DETOX TREATMENT AND RECOVERY
Legal Name: SOUTHERN CALIFORNIA DETOX TREATMENT AND RECOVERY LLC.

Address: 41743 ENTERPRISE CIRCLE N.

#208

City, State Zip: TEMECULA, CA 92590 Phone: (714) 854-2026

Record ID: 330105BP
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: DESERT PALMS RECOVERY

Legal Name: BEHAVIORAL HEALTH SOLUTIONS OF CALIFORNIA LLC

Address: 67580 JONES ROAD

City, State Zip: CATHEDRAL CITY, CA 92234

Phone: (760) 969-4140 Fax: (760) 969-4169

Record ID: 330112BP
Service Type: RES-DETOX

Resident Capacity: 36
Total Occupancy: 36
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: SUNSPIRE HEALTH IOP

Legal Name: BEHAVIORAL HEALTH SOLUTIONS OF CALIFORNIA LLC

Address: 73-771 DINAH SHORE DRIVE,

SUITE 200

City, State Zip: PALM DESERT, CA 92211

Phone: (760) 992-3480 Fax: (760) 797-7350

Record ID: 330112CP

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: SERENITY PALMS

Legal Name: IRECOVER TREATMENT CENTERS INC.

Address: 37066 BANKSIDE DRIVE City, State Zip: CATHEDRAL CITY, CA 92234

Phone: (760) 459-3736 Fax: (406) 784-3994

Record ID: 330113AP
Service Type: RES-DETOX

Resident Capacity: 30 Total Occupancy: 30 Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: ADDICTION THERAPEUTIC SERVICES

Legal Name: J. HERNDONS, LLC

Address: 69730 HWY 111, SUITE #109 City, State Zip: RANCHO MIRAGE, CA 92270

Phone: (760) 778-6120 Fax: (760) 406-6077

Record ID: 330114AP
Service Type: NON
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: AJ'S AMETHYST HOUSE
Legal Name: B II A J OUR HOUSE, LLC
Address: 1119 W. 7TH STREET
City, State Zip: SAN JACINTO, CA 92582

Phone: (951) 654-1089 Fax: (951) 654-7868

Record ID: 330115AP
Service Type: RES
Resident Capacity: 28
Total Occupancy: 32
Target Population: 1.3

Expiration Date: 12/31/2017 IMS: No

Program Name: KEN SEELEY COMMUNITIES

Legal Name: INTERVENTION911

Address: 420 S PALM CANYON DRIVE

SUITE C AND D

City, State Zip: PALM SPRINGS, CA 92262-7304

Phone: (323) 401-3660

Record ID: 330116BP Service Type: NON

Target Population: 1.1

Expiration Date: 12/31/2017 IMS:

Program Name:BELLA MONTE RECOVERYLegal Name:BELLA MONTE RECOVERY LLCAddress:68111 CALLE TIENDAS

City, State Zip: DESERT HOT SPRINGS, CA 92240

Phone: (760) 676-5125 Fax: (760) 671-9806

No

Record ID: 330117AP

Service Type: RES
Resident Capacity: 38
Total Occupancy: 38
Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name:2 SHINE AGAINLegal Name:2 SHINE AGAIN INC.Address:37347 AVENIDA CHAPALACity, State Zip:TEMECULA, CA 92592

Phone: (951) 303-3056 Fax: (951) 303-3056

Record ID: 330119AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: SECOND 2 NONE RECOVERY SERVICES
Legal Name: OPTIMAL METABOLIC SOLUTIONS, LLC

Address: 40165 MURRIETA HOT SPRINGS ROAD, SUITE I

City, State Zip: MURRIETA, CA 92563

Phone: (951) 461-1800 Fax: (951) 667-3383

Record ID: 330123AP

Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: TEMECULA SAPT

Legal Name: COUNTY OF RIVERSIDE

Address: 40925 COUNTY CENTER DRIVE, SUITE #200

City, State Zip: TEMECULA, CA 92590

Phone: (951) 600-6360 Fax: (951) 600-6850

Record ID: 330124BN
Service Type: NON
Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: DESERT HOT SPRINGS SAPT
Legal Name: COUNTY OF RIVERSIDE
Address: 14320 PALM DRIVE

City, State Zip: DESERT HOT SPRINGS, CA 92240

Phone: (760) 773-6767 Fax: (760) 773-6760

Record ID: 330124CN Service Type: NON

Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: LAKE ELSINORE SAPT
Legal Name: COUNTY OF RIVERSIDE

Address: 31760 CASINO DRIVE, SUITE 200

City, State Zip: LAKE ELSINORE, CA 92530

Phone: (951) 471-4649 Fax: (951) 471-4687

Record ID: 330124DN Service Type: NON

Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: BANNING SAPT

Legal Name: COUNTY OF RIVERSIDE
Address: 1330 W. RAMSEY STREET
City, State Zip: BANNING, CA 92220

Phone: (951) 849-7142 Fax: (951) 849-1762

Record ID: 330124EN
Service Type: NON

Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: SOVEREIGN HEALTH OF CALIFORNIA

Legal Name: DUAL DIAGNOSIS TREATMENT CENTER, INC.

Address: 69508 BORREGO ROAD

City, State Zip: CATHEDRAL CITY, CA 92234

Phone: (949) 324-2818 Fax: (760) 699-2450

Record ID: 330125BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: BLUESTONE RECOVERY, INC.
Legal Name: BLUESTONE RECOVERY, INC.
Address: 1660 CHICAGO AVENUE, #M-11

City, State Zip: RIVERSIDE, CA 92507

Phone: (951) 823-0540 Fax: (951) 823-0541

Record ID: 330127AP
Service Type: NON
Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: SOUTH CALIFORNIA ROAD TO RECOVERY

Legal Name: MALIBU BEHAVIORAL HEALTH SERVICES, INC.

Address: 7057 GASKIN PLACE
City, State Zip: RIVERSIDE, CA 92506
Phone: (949) 397-5056

Record ID: 330128AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: THE CENTER FOR LIFE CHANGE

Legal Name: THE CENTER FOR LIFE CHANGE, INC. Address: 43397 BUSINESS PARK DRIVE, SUITE D8

City, State Zip: TEMECULA, CA 92590 Phone: (951) 775-4000

Record ID: 330129AN
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: WEST COAST RECOVERY CENTER, LLC Legal Name: WEST COAST RECOVERY CENTER, LLC

Address: 910 N STATE STREET City, State Zip: HEMET, CA 92543

Phone: (951) 929-8200 Fax: (951) 929-8750

Record ID: 330130BP
Service Type: NON
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: WEST COAST RECOVERY CENTER, LLC Legal Name: WEST COAST RECOVERY CENTER, LLC

Address: 910 N STATE STREET,

]

City, State Zip: HEMET, CA 92543

Phone: (951) 929-8200 Fax: (951) 929-8750

Record ID: 330130CP Service Type: NON

Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: SOVEREIGN HEALTH CANTERA

Legal Name: SATYA HEALTH OF CALIFORNIA, INC.

Address: 501 N. CANTERA CIRCLE City, State Zip: PALM SPRINGS, CA 92262

Phone: (949) 276-5553 **Record ID:** 330131AP

Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: ADELANTE RECOVERY CENTER, INC.
Legal Name: ADELANTE RECOVERY CENTER, INC.
Address: 23970 SPENSER BUTTE DRIVE

City, State Zip: PERRIS, CA 92570

Phone: (951) 657-7863 Fax: (951) 943-9251

Record ID: 330132AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: GRANJA RESIDENTIAL DETOXIFICATION AND TREATMENT SERVICES

Legal Name: WEST COAST WELLNESS CENTERS LLC

Address: 39689 GRANJA COURT City, State Zip: TEMECULA, CA 92592

Phone: (951) 693-9200 Fax: (951) 929-8500

Record ID: 330133AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: MOUNTAINSIDE RECOVERY CENTER
Legal Name: WEST COAST WELLNESS CENTERS LLC

Address: 25827 BAY MEADOWS WAY City, State Zip: MURRIETA, CA 92563

Phone: (951) 302-1247 Fax: (915) 929-8500

Record ID: 330133BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name:MOUNTAINSIDE RECOVERY CENTERLegal Name:WEST COAST WELLNESS CENTERS LLCAddress:34480 SYCAMORE SPRINGS ROAD

City, State Zip: HEMET, CA 92544

Phone: (951) 693-9200 Fax: (951) 693-9200

Record ID: 330133CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: MOUNTAINSIDE RECOVERY CENTER

Legal Name: WEST COAST WELLNESS CENTERS LLC

Address: 27600 SUNDAY DRIVE City, State Zip: TEMECULA, CA 92590

Phone: (951) 308-0018 Fax: (951) 929-8500

Record ID: 330133DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: MOUNTAINSIDE RECOVERY CENTER

Legal Name: WEST COAST WELLNESS CENTERS LLC

Address: 784 OLIVETTE STREET
City, State Zip: HEMET, CA 92543
Phone: (951) 929-8200

Record ID: 330133FP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: WEST COAST COUNSELING WELLNESS CENTERS

Legal Name: WEST COAST WELLNESS CENTERS LLC

Address: 660 N CAWSTON AVENUE
City, State Zip: HEMET, CA 92545
Phone: (951) 929-8200

Record ID: 330133GP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: MOUNTAINSIDE RECOVERY CENTER

Legal Name: WEST COAST WELLNESS CENTERS LLC

Address: 36480 VILLA DEL SOL City, State Zip: WILDOMAR, CA 92590

Phone: (951) 223-4695 Fax: (951) 929-2780

Record ID: 330133JP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.8

Expiration Date: 12/31/2018 IMS: No

Program Name: MOUNTAINSIDE RECOVERY CENTER
Legal Name: WEST COAST WELLNESS CENTERS LLC

Address: 31631 AUTO CENTER DRIVE City, State Zip: LAKE ELSINORE, CA 92530

Phone: (951) 929-8200 Fax: (951) 929-2780

Record ID: 330133KP
Service Type: RES-DETOX

Resident Capacity: 36
Total Occupancy: 36
Target Population: 1.8

Expiration Date: 12/31/2018 IMS: No

Program Name: MOUNTAINSIDE RECOVERY CENTER
Legal Name: WEST COAST WELLNESS CENTERS LLC

Address: 44240 LA CRUZ DRIVE City, State Zip: TEMECULA, CA 92590

Phone: (951) 223-4695 Fax: (951) 929-2780

Record ID: 330133LP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.8

Expiration Date: 12/31/2018 IMS: No

Program Name: MOUNTAINSIDE RECOVERY CENTER

Legal Name: WEST COAST WELLNESS CENTERS LLC

Address: 21952 AVENIDA DE ARBOLES

City, State Zip: MURRIETA, CA 92562

Phone: (951) 223-4695 Fax: (951) 929-2780

Record ID: 330133NP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.8

Expiration Date: 3/31/2019 IMS: No

Program Name: CALIFORNIA HIGHLANDS ADDICTION TREATMENT

Legal Name: CALIFORNIA ADDICTION TREATMENT CENTER LLC

Address: 15986 S. HIGHLAND SPRINGS AVENUE

City, State Zip: BANNING, CA 92220

Phone: (213) 787-5755 Fax: (909) 245-1090

Record ID: 330135AP
Service Type: RES-DETOX

Resident Capacity: 16 Total Occupancy: 16 Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: BEST NEW LIFE RECOVERY

Legal Name: BROOKE ELIZABETH BEST-FREEMAN

Address: 20755 CARANCHO ROAD City, State Zip: TEMECULA, CA 92590 Phone: (951) 545-4606

Record ID: 330137BP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: THE KILOBY CENTER FOR RECOVERY, INC. Legal Name: THE KILOBY CENTER FOR RECOVERY, INC. Address: 71-777 SAN JACINTO DRIVE, SUITE 102

City, State Zip: RANCHO MIRAGE, CA 92270

Phone: (442) 666-8526 Record ID: 330138AP

Record ID: 33013
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: NEW LIFE RIVERSIDE SUBSTANCE USE

Legal Name: RIVERSIDE COUNTY SUBSTANCE USE PROGRAM

Address: 771 BLAINE STREET, SUITE C

City, State Zip: RIVERSIDE, CA 92507

1.1

Phone: (951) 358-4120 Fax: (951) 358-4189

Record ID: 330139AN Service Type: NON

Target Population:

Expiration Date: 1/31/2018 IMS: No

Program Name: DAY REPORTING CENTER RIVERSIDE SUBSTANCE USE

Legal Name: RIVERSIDE COUNTY SUBSTANCE USE PROGRAM

Address: 1020 IOWA AVENUE, SUITE B

City, State Zip: RIVERSIDE, CA 92507

Phone: (951) 358-6691 Fax: (951) 358-4479

Record ID: 330139BN
Service Type: NON
Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: BLUE TIGER RECOVERY

Legal Name: BLUE TIGER RECOVERY LLC

Address: 2825 E TAHQUITZ CANYON WAY, BUILDING C

City, State Zip: PALM SPRINGS, CA 92262

Phone: (760) 534-3487 Fax: (760) 406-4045

No

No

Record ID: 330140AP

Service Type: NON Target Population: 1.1

Expiration Date: 11/30/2017 IMS:

Program Name: FULL CIRCLE RECOVERY

Legal Name: FULL CIRCLE RECOVERY, INC.

Address: 765 GARDEN GROVE City, State Zip: NORCO, CA 92860

Phone: (951) 737-6199 Fax: (951) 737-6199

Record ID: 330141AN

Service Type: RES
Resident Capacity: 4
Total Occupancy: 4
Target Population: 1.2

Expiration Date: 2/28/2018 IMS: No

Program Name: FULL CIRCLE RECOVERY

Legal Name: FULL CIRCLE RECOVERY, INC.

Address: 139 TRAKEHNER City, State Zip: NORCO, CA 92860

Phone: (951) 737-6199 Fax: (951) 737-6199

Record ID: 330141BN
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2018 IMS:

Program Name: FULL CIRCLE RECOVERY, INC.

Legal Name: FULL CIRCLE RECOVERY, INC. Address: 1860 LAMPTON LANE City, State Zip: NORCO, CA 92860

Phone: (951) 737-6199 Fax: (951) 737-6199

Record ID: 330141CN

Service Type: NON
Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: CLEAR VISION RECOVERY CENTER

Legal Name: CLEAR VISION, LLC
Address: 16891 ALITA DRIVE
City, State Zip: RIVERSIDE, CA 92504

Phone: (951) 313-7403 Fax: (951) 787-4962

Record ID: 330142AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: PHOENIX RISING RECOVERY

Legal Name: EXECUTIVE RECOVERY GROUP, INC.

Address: 35450 PEGASUS COURT City, State Zip: PALM DESERT, CA 92211

Phone: (760) 409-1287
Record ID: 330143AP

Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: PHOENIX RISING RECOVERY

Legal Name: EXECUTIVE RECOVERY GROUP, INC.

Address: 77725 ENFIELD LANE,

100/200

City, State Zip: PALM DESERT, CA 92211

Phone: (760) 409-1287

Record ID: 330143BP

Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: RANCHO MILAGRO RECOVERY, INC.

Legal Name: RANCHO MILAGRO RECOVERY, INC. Address: 31985 HONEYSUCKLE CIRCLE

City, State Zip: WINCHESTER, CA 92596

Phone: (951) 384-2672

Record ID: 330144AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6

Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: SUN RAY ADDICTIONS COUNSELING & EDUCATION

Legal Name: SUN RAY HOLDING COMPANY, LLC
Address: 950 N STATE STREET, SUITE D & E

City, State Zip: HEMET, CA 92543

Phone: (951) 652-3560 Fax: (951) 929-8750

Record ID: 330145AP
Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: SOUTHERN CALIFORNIA ADDICTION CENTER
Legal Name: SOUTHERN CALIFORNIA ADDICTION CENTER

Address: 36500 DE PORTOLA ROAD City, State Zip: TEMECULA , CA 92592

Phone: (951) 302-2481 Fax: (951) 302-2392

Record ID: 330146AP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

SOUTHERN CALIFORNIA ADDICTION CENTER Program Name: Legal Name: SOUTHERN CALIFORNIA ADDICTION CENTER

44065 MARGARITA ROAD, SUITE 100 Address:

City, State Zip: TEMECULA, CA 92592

(714) 619-5084 Phone: (714) 619-5081 Fax:

Record ID: 330146BP Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: SOUTHERN CALIFORNIA ADDICTION CENTER

SOUTHERN CALIFORNIA ADDICTION CENTER Legal Name: Address: 40624 CALLE CANCION

City, State Zip: TEMECULA, CA 92592 Phone: (714) 619-5081

Record ID: 330146CP Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 8/31/2019 IMS:

SOUTHERN CALIFORNIA ADDICTION CENTER Program Name:

Legal Name: SOUTHERN CALIFORNIA ADDICTION CENTER

Address: 44764 MUMM ST. City, State Zip: TEMECULA, CA 92592 Phone: (714) 619-5081

Record ID: 330146DP Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

8/31/2019 IMS: Expiration Date: No

Program Name: LEE'S TREATMENT AND RECOVERY

LEE'S TREATMENT AND RECOVERY, LLC Legal Name:

245 N. LINCOLN Address:

CORONA, CA 92882-1851 City, State Zip:

Phone: (877) 251-3669 Fax: (951) 737-6691

Record ID: 330147AP Service Type: RES-DETOX

Resident Capacity: 7 Total Occupancy: Target Population: 1.1

Expiration Date: 5/31/2018 TMS: No

PALM DESERT RECOVERY CENTER Program Name:

Legal Name: PALM DESERT RECOVERY CENTER, INC.

73733 FRED WARING DRIVE, Address:

SUITE 100

City, State Zip: PALM DESERT, CA 92260

Phone: (760) 230-5300 Fax: (760) 990-2247

Record ID: 330148AP

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: ZEN MOUNTAIN PATH Legal Name: ZEN RECOVERY, LLC Address: 26299 TAHQUITZ DRIVE City, State Zip: IDYLLWILD, CA 92549

Phone: (714) 604-2684 330149AP

Record ID: Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.2

Expiration Date: 7/31/2018 IMS: No Program Name: INLAND DETOX, INC
Legal Name: INLAND DETOX, INC
Address: 38630 MESA ROAD

City, State Zip: TEMECULA, CA 92592 Phone: (951) 355-9116

Record ID: 330150AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: SOLUTION BASED TREATMENT & DETOX

Legal Name: SCE CORP.

Address: 41017 ARRON COURT City, State Zip: MURRIETA, CA 92562

Phone: (951) 698-4823 Fax: (951) 696-9783

Record ID: 330152AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: PACIFIC GROVE HOSPITAL

Legal Name: VISTA BEHAVIORAL HOSPITAL, LLC

Address: 5900 BROCKTON AVENUE City, State Zip: RIVERSIDE, CA 92506

Phone: (951) 275-8400 Fax: (951) 786-0293

Record ID: 330153AP

Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: TURNING POINT TREATMENT CENTER

Legal Name: TURNING POINT TREATMENT CENTER, INC.

Address: 30235 YNEZ ROAD City, State Zip: TEMECULA, CA 92592

Phone: (951) 308-1913 Fax: (951) 308-9133

Record ID: 330154AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: AXIS RESIDENTIAL TREATMENT, LLC
Legal Name: AXIS RESIDENTIAL TREATMENT, LLC

Address: 75450 FAIRWAY DRIVE City, State Zip: INDIAN WELLS, CA 92210

Phone: (760) 469-8275 Fax: (760) 346-8032

Record ID: 330155AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6

Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: SAN DIEGO DETOX, INC.
Legal Name: SAN DIEGO DETOX, INC.
Address: 9480 PATS POINT
City, State Zip: CORONA, CA 92883
Phone: (951) 987-0540

Record ID: 330156CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name:SAN DIEGO DETOX, INC.Legal Name:SAN DIEGO DETOX, INC.Address:9440 PATS POINT

City, State Zip: CORONA, CA 92883 Phone: (951) 987-0540

Record ID: 330156DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: BRISAS IOP
Legal Name: BRISAS IOP, LLC

Address: 5700 DIVISION STREET, SUITE 200-A AND SUITE 200-B

City, State Zip: RIVERSIDE, CA 92506

Phone: (951) 205-5888 Fax: (951) 346-3399

Record ID: 330157AP
Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: DIVINE INTERVENTION RECOVERY RANCH

Legal Name: THE ROSE OF SHARON 7
Address: 23931 S. WARREN ROAD
City, State Zip: SAN JACINTO, CA 92582

Phone: (760) 618-1286 Fax: (951) 926-1173

Record ID: 330158AN
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 1/31/2019 IMS: No

Program Name: ASCENSION TREATMENT CENTERS CALIFORNIA, LLC
Legal Name: ASCENSION TREATMENT CENTERS CALIFORNIA, LLC

Address: 555 S PALM CANYON DRIVE, A202

City, State Zip: PALM SPRINGS, CA 92264

Phone: (760) 396-7436

Record ID: 330159AP
Service Type: NON
Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: ASCENSION TREATMENT CENTERS CALIFORNIA, LLC
Legal Name: ASCENSION TREATMENT CENTERS CALIFORNIA, LLC

Address: 280 E. MEL AVE.

City, State Zip: PALM SPRINGS, CA 92262

Phone: (760) 396-7436 Record ID: 330159BP

Service Type: RES-DETOX
Resident Capacity: 14
Total Occupancy: 14

Total Occupancy: 14
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: JILOA TREATMENT

Legal Name: JILOA TREATMENT AND RECOVERY CENTERS, INC.

Address: 26340 KALMIA AVENUE City, State Zip: MORENO VALLEY, CA 92555

Phone: (951) 203-4474 Fax: (951) 208-4491

Record ID: 330160AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.8

Expiration Date: 1/31/2019 IMS: No

Program Name: NATURAL REST HOUSE Legal Name: NATURAL REST HOUSE, INC. Address: 79100 OCOTILLO DRIVE City, State Zip: LA QUINTA, CA 92270

Phone: (812) 204-4324

Record ID: 330161AP RES-DETOX Service Type:

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.8

Expiration Date: 6/30/2019 IMS: No

Program Name: BETTY FORD CENTER - OUTPATIENT PROGRAM

Legal Name: HAZELDEN BETTY FORD FOUNDATION

39000 BOB HOPE DRIVE Address: City, State Zip: RANCHO MIRAGE, CA 92270

1.7

Phone: (866) 831-5700 Fax: (760) 733-1807

Record ID: 330164AN Service Type: NON

Target Population: Expiration Date: 5/31/2019 IMS: No

EVOLVE DETOX AND REHABILITATION CENTER, INC. Program Name:

Legal Name: EVOLVE DETOX AND REHABILITATION CENTER, INC. Address:

6560 SANDY LANE City, State Zip: RIVERSIDE, CA 92505

Phone: (714) 232-0649 Fax: (714) 252-0173

Record ID: 330165AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: TRANQUIL PALMS

Legal Name: SBR RECOVERY. LLC

Address: 44-775 DEEP CANYON ROAD City, State Zip: PALM DESERT, CA 92260

Phone: (858) 345-7422

Record ID: 330166AP Service Type: NON

Target Population: 1.3

3/31/2019 Expiration Date: IMS: No

Program Name: GRAND TERRACE DETOX AND RECOVERY Legal Name: GRAND TERRACE DETOX AND RECOVERY

18989 SOUTH GRAND AVE. Address: City, State Zip: LAKE ELSINORE, CA 92530

Phone: (951) 201-9145 Fax: (714) 252-0173

Record ID: 330168AP RES-DETOX Service Type:

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

State of California, Department of Health Care Services Licensed Residential Facilities and/or Certified Alcohol and Drug Programs

As of 11/1/2017

Sacramento County

Program Name: ALPHA OAKS

Legal Name: ASSOCIATED REHABILITATION PROGRAM FOR WOMEN, INC.

Address: 8400 FAIR OAKS BOULEVARD City, State Zip: CARMICHAEL, CA 95608-2502

Phone: (916) 944-3920 Fax: (916) 944-7740

Record ID: 340001AN Service Type: RES-DETOX

Resident Capacity: 23 Total Occupancy: 23 Target Population: 1.3

Expiration Date: 5/31/2018 IMS: No

Program Name: CORNERSTONE

Legal Name: ASSOCIATED REHABILITATION PROGRAM FOR WOMEN, INC.

Address: 6348 AND 6350 APPIAN WAY City, State Zip: CARMICHAEL, CA 95608-0724

Phone: (916) 966-5102 Fax: (916) 966-9362

Record ID: 340001BN

Service Type: RES
Resident Capacity: 11
Total Occupancy: 12
Target Population: 1.3

Expiration Date: 4/30/2018 IMS: No

Program Name: ALTUA

Legal Name: RIVER CITY RECOVERY CENTER, INC.

Address: 12490 ALTA MESA ROAD City, State Zip: HERALD, CA 95638-8409

Phone: (209) 748-2470

Record ID: 340002AN
Service Type: RES
Resident Capacity: 55
Total Occupancy: 55
Target Population: 1.2

Expiration Date: 7/31/2018 IMS: No

Program Name: STARLIGHT

Legal Name: RIVER CITY RECOVERY CENTER, INC.

Address: 2218 E STREET

City, State Zip: SACRAMENTO, CA 95816

Phone: (916) 442-4519 Fax: (916) 442-3577

Record ID: 340002BN

Service Type: RES
Resident Capacity: 24
Total Occupancy: 26
Target Population: 1.3

Expiration Date: 11/30/2018 IMS: No

Program Name: SOBRIETY BRINGS A CHANGE
Legal Name: SOBRIETY BRINGS A CHANGE
Address: 4600 47TH AVENUE #102
City, State Zip: SACRAMENTO, CA 95824-3923

Phone: (916) 454-4242

Record ID: 340008AN
Service Type: NON
Target Population: 1.5

Expiration Date: 9/30/2018 IMS: No

Program Name: ALTERNATIVE HOUSE
Legal Name: WELLSPACE HEALTH
Address: 1550 JULIESSE AVENUE
City, State Zip: SACRAMENTO, CA 95815-1803

Phone: (916) 921-6598

Record ID: 340015AN
Service Type: RES-DETOX

Resident Capacity: 48
Total Occupancy: 48
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: CRISIS INTAKE AND COUNSELING CENTER

Legal Name: WELLSPACE HEALTH Address: 1820 J STREET

City, State Zip: SACRAMENTO, CA 95811-3010

Phone: (916) 325-5556 Fax: (916) 444-5620

Record ID: 340015CN
Service Type: NON
Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: OPTIONS FOR RECOVERY - RESIDENTIAL TREATMENT PROGRAM

Legal Name: VOLUNTEERS OF AMERICA NORTHERN CALIFORNIA AND NORTHERN NEVADA, INC.

Address: 1001 GRAND AVENUE

City, State Zip: SACRAMENTO, CA 95838-3512

Phone: (916) 929-1951 Fax: (916) 929-5116

Record ID: 340018AN
Service Type: RES-DETOX
Resident Capacity: 16

Total Occupancy: 28
Target Population: 1.4

Expiration Date: 11/30/2018 IMS: No

Program Name: D & A DETOX CENTER
Legal Name: D & A DETOX CENTER
Address: 2721 BARBERA WAY

City, State Zip: RANCHO CORDOVA, CA 95670-4804

Phone: (916) 364-7660

Record ID: 340035CN
Service Type: RES-DETOX

Resident Capacity: 10 Total Occupancy: 10 Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name:D & A TREATMENT CENTERLegal Name:D & A DETOX CENTERAddress:10157 LA ALEGRIA DRIVE

City, State Zip: RANCHO CORDOVA, CA 95670-3109

Phone: (916) 361-2833 Fax: (916) 364-5389

Record ID: 340035FN

Service Type: RES
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.2

Expiration Date: 6/30/2019 IMS: No

Program Name: ANOTHER CHOICE, ANOTHER CHANCE
Legal Name: ANOTHER CHOICE, ANOTHER CHANCE

Address: 7000 FRANKLIN BOULEVARD

SUITES 625 AND 670

City, State Zip: SACRAMENTO, CA 95823

Phone: (916) 388-9418

Record ID: 340037AN Service Type: NON

Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: SACRAMENTO COUNTY ADULT DRUG COURT Legal Name: SACRAMENTO COUNTY ADULT DRUG COURT

Address: 3201 FLORIN-PERKINS ROAD City, State Zip: SACRAMENTO, CA 95826-3900

Phone: (916) 875-1171

Record ID: 340038AN
Service Type: NON
Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: NEW DAWN TREATMENT CENTERS
Legal Name: CDT SERVICE CORPORATION
Address: 6371 AUBURN BOULEVARD, SUITE A
City, State Zip: CITRUS HEIGHTS, CA 95621-5275

Phone: (916) 723-1319 Fax: (866) 575-1276

Record ID: 340039AP
Service Type: NON
Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: NEW DAWN TREATMENT CENTERS
Legal Name: CDT SERVICE CORPORATION

Address: 6039, 6040, 6043, AND 6045 ROLOFF WAY

City, State Zip: ORANGEVALE, CA 95662-4544

Phone: (916) 989-1675 Fax: (866) 892-3394

Record ID: 340039BP
Service Type: RES
Resident Capacity: 22

Total Occupancy: 22
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: NEW DAWN TREATMENT CENTERS
Legal Name: CDT SERVICE CORPORATION
Address: 8780 & 8782 SHERRY DRIVE
City, State Zip: ORANGEVALE, CA 95662-4534

Phone: (916) 989-1675 Fax: (866) 892-3394

Record ID: 340039CP
Service Type: RES-DETOX

Resident Capacity: 11 Total Occupancy: 11 Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: NEW DAWN TREATMENT CENTERS
Legal Name: CDT SERVICE CORPORATION

Address: 9960 BUSINESS PARK DRIVE, SUITE 160

City, State Zip: SACRAMENTO, CA 95827-1733

Phone: (916) 363-2732

Record ID: 340039EP
Service Type: NON
Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: THE PROMISE HOUSE

Legal Name: BRIDGES PROFESSIONAL TREATMENT SERVICES

Address: 2727 P STREET

City, State Zip: SACRAMENTO, CA 95816-6403

Phone: (916) 452-3073 Fax: (916) 452-1565

Record ID: 340041BN
Service Type: RES-DETOX

Resident Capacity: 28
Total Occupancy: 28
Target Population: 1.3

Expiration Date: 10/31/2019 IMS: No

Program Name: BRIDGES OUTPATIENT TREATMENT SERVICES
Legal Name: BRIDGES PROFESSIONAL TREATMENT SERVICES

Address: 3600 POWER INN ROAD, SUITE D City, State Zip: SACRAMENTO, CA 95826-3826

Phone: (916) 453-2704 Fax: (916) 453-2708

Record ID: 340041CN
Service Type: NON
Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: BRIDGES RESIDENTIAL

Legal Name: BRIDGES PROFESSIONAL TREATMENT SERVICES

Address: 1731 P STREET

City, State Zip: SACRAMENTO, CA 95814-6104

Phone: (916) 450-0700 Fax: (916) 930-0554

Record ID: 340041DN Service Type: RES-DETOX

Resident Capacity: 28
Total Occupancy: 28
Target Population: 1.2

Expiration Date: 7/31/2019 IMS: No

Program Name: CARES ALCOHOL AND OTHER DRUG OUTPATIENT PROGRAM

Legal Name: THE CENTER FOR A.I.D.S. RESEARCH, EDUCATION AND SERVICES - SACRAMENTO

Address: 1500 21ST STREET

City, State Zip: SACRAMENTO, CA 95814-5216

Phone: (916) 443-3299 Fax: (916) 325-1980

Record ID: 340042BN

Service Type: NON

Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: CENTER POINT

Legal Name: CENTER POINT, INC.

Address: 11228 FAIR OAKS BOULEVARD City, State Zip: FAIR OAKS, CA 95628-5139

Phone: (916) 962-2800 Fax: (415) 492-8844

Record ID: 340048AN

Service Type: RES
Resident Capacity: 31
Total Occupancy: 35
Target Population: 1.4

Expiration Date: 9/30/2019 IMS: No

Program Name: NATIONAL COUNCIL ON ALCOHOLISM AND

DRUG DEPENDENCE SACRAMENTO REGION AFFILIATE

Legal Name: NATIONAL COUNCIL ON ALCOHOLISM AND

DRUG DEPENDENCE INC. SACRAMENTO REGION AFFILIATE

Address: 2143 HURLEY WAY

City, State Zip: SACRAMENTO, CA 95825

Phone: (916) 922-5110 Fax: (916) 921-1832

Record ID: 340052BN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name:SACRAMENTO VETERANS RESOURCE CENTERLegal Name:VIETNAM VETERANS OF CALIFORNIA, INC.Address:7270 EAST SOUTHGATE DRIVE, BUILDING 4

City, State Zip: SACRAMENTO, CA 95823-2621

Phone: (916) 393-8387 Fax: (916) 393-8389

Record ID: 340058AN

Service Type: RES
Resident Capacity: 22
Total Occupancy: 22
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: KOINONIA GROUP HOME #5
Legal Name: KOINONIA FOSTER HOMES, INC.

Address: 4232 BIG CLOUD WAY City, State Zip: ANTELOPE, CA 95843-2406

Phone: (916) 652-0171 Fax: (916) 652-3979

Record ID: 340063AN
Service Type: DSS
Target Population: 1.5

Expiration Date: 10/31/2018 IMS: No

Program Name: CLEAN & SOBER DETOX

Legal Name: CLEAN & SOBER DETOX, A CALIFORNIA NONPROFIT CORPORATION

Address: 8946 MADISON AVENUE City, State Zip: FAIR OAKS, CA 95628-4010

Phone: (916) 965-3386 Fax: (916) 536-1393

Record ID: 340067AN Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: AZURE ACRES IOP

Legal Name: THE CAMP RECOVERY CENTER, LLC

Address: 2641 COTTAGE WAY SUITES 8, 9 AND 10

City, State Zip: SACRAMENTO, CA 95825

Phone: (916) 338-0400 Fax: (916) 338-3589

Record ID: 340078AP
Service Type: NON

Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: SACRAMENTO TREATMENT CLINIC

Legal Name: TREATMENT ASSOCIATES, INC.

Address: 7225 EAST SOUTHGATE DRIVE, SUITE D

City, State Zip: SACRAMENTO, CA 95823-2651

Phone: (760) 710-0951 Fax: (916) 394-1010

Record ID: 340080AP
Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: SACRAMENTO NATIVE AMERICAN HEALTH CENTER

Legal Name: SACRAMENTO NATIVE AMERICAN HEALTH CENTER, INC.

Address: 2020 J STREET

City, State Zip: SACRAMENTO, CA 95814-3120

Phone: (916) 341-0575 Fax: (916) 341-0574

Record ID: 340082AN

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: STRATEGIES FOR CHANGE OUTPATIENT

Legal Name: STRATEGIES FOR CHANGE

Address: 4441 AUBURN BOULEVARD, SUITE E City, State Zip: SACRAMENTO, CA 95841-4139

Phone: (916) 473-5764 Fax: (916) 473-5766

Record ID: 340084AN

Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: STRATEGIES FOR CHANGE
Legal Name: STRATEGIES FOR CHANGE
Address: 4343 WILLIAMSBOURGH DRIVE
City, State Zip: SACRAMENTO, CA 95823-2006

Phone: (916) 395-3552

Record ID: 340084BN
Service Type: NON
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: SIERRA VISTA HOSPITAL OUTPATIENT CD PROGRAM

Legal Name: BHC SIERRA VISTA HOSPITAL, INC. Address: 8009 BRUCEVILLE ROAD #100

City, State Zip: SACRAMENTO, CA 95823-2332

Phone: (916) 288-0300 Fax: (916) 689-5517

Record ID: 340090AP
Service Type: NON
Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: CLEAN & SOBER RECOVERY HOME

Legal Name: CLEAN & SOBER RECOVERY SERVICES, INC.

Address: 5820 CHESTNUT AVENUE City, State Zip: ORANGEVALE, CA 95662-4807

Phone: (916) 990-0190 Fax: (916) 990-0193

Record ID: 340093AP

Service Type: RES
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: CLEAN & SOBER RECOVERY SERVICES, INC.

Legal Name: CLEAN & SOBER RECOVERY SERVICES, INC.

Address: 9198 GREENBACK LANE, SUITE 101

City, State Zip: ORANGEVALE, CA 95662

Phone: (916) 990-0190 Fax: (916) 990-0193

Record ID: 340093BP

Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: PATHWAYS RECOVERY
Legal Name: PATHWAYS RECOVERY

Address: 6538 GREY OAK COURT

City, State Zip: CITRUS HEIGHTS, CA 95621-1024

Phone: (916) 735-8377 Fax: (877) 494-5088

Record ID: 340098AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: TOWNS HEALTH SERVICES
Legal Name: TOWNS HEALTH SERVICES, INC.

Address: 750 SPAANS DRIVE SUITE C, D, AND F

City, State Zip: GALT, CA 95632-8609

Phone: (916) 612-2452 Fax: (209) 744-9910

Record ID: 340100AP

Service Type: NON
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: PALM TREE RANCH

Legal Name: TOWNS HEALTH SERVICES, INC. Address: 12370 CLAY STATION ROAD

City, State Zip: HERALD, CA 95638

Phone: (209) 744-9909 Fax: (209) 744-9910

Record ID: 340100BP Service Type: RES

Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1

Expiration Date: 1/31/2020 IMS: No

Program Name: SACRAMENTO RECOVERY HOUSE

Legal Name: SACRAMENTO RECOVERY HOUSE, INC.

Address: 1914 22ND STREET

City, State Zip: SACRAMENTO, CA 95816-7109

Phone: (916) 455-6258
Record ID: 340103AN

Service Type: RES
Resident Capacity: 17
Total Occupancy: 18
Target Population: 1.2

Expiration Date: 8/31/2018 IMS: No

Program Name: GATEWAY HOUSE

Legal Name: SACRAMENTO RECOVERY HOUSE, INC.

Address: 4049 MILLER WAY

City, State Zip: SACRAMENTO, CA 95817-1332

Phone: (916) 451-9312 Fax: (916) 451-8014

Record ID: 340103BN

Service Type: RES
Resident Capacity: 18
Total Occupancy: 18
Target Population: 1.3

Expiration Date: 5/31/2018 IMS: No

Program Name:VERITAS COUNSELING CDIOPLegal Name:VERITAS COUNSELING CDIOPAddress:3137 DWIGHT ROAD, SUITE 600City, State Zip:ELK GROVE, CA 95758-6472

Phone: (916) 801-3315 Fax: (916) 422-1321

Record ID: 340105AP

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: VALLEY RECOVERY CENTER OF CALFORNIA

Legal Name: SUMMIT BHC SACRAMENTO, LLC Address: 2221 FAIR OAKS BOULEVARD City, State Zip: SACRAMENTO, CA 95825-5501

Phone: (916) 514-8500

Record ID: 340106AP
Service Type: RES-DETOX

Resident Capacity: 48
Total Occupancy: 48
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: CEDAR POINT RECOVERY

Legal Name: CEDAR POINT RECOVERY, LLC

Address: 8950 CAL CENTER DRIVE, SUITE 160

City, State Zip: SACRAMENTO, CA 95826

Phone: (916) 253-4837 Fax: (848) 456-4536

Record ID: 340109AP

Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: CEDAR POINT RECOVERY Legal Name: CEDAR POINT RECOVERY, LLC

Address: 1099 STEWART ROAD

City, State Zip: SACRAMENTO, CA 95864-5303

Phone: (844) 253-4837 Fax: (848) 456-4536

Record ID: 340109BP RES-DETOX Service Type:

Resident Capacity: 6 Total Occupancy: 10 Target Population: 1.1

10/31/2017 Expiration Date: IMS: No

Program Name: HOPE @ LAST

Legal Name: LAST ENTERPRISE, INC. Address: 6326 MAIN AVENUE,

22

ORANGEVALE, CA 95662 City, State Zip:

Phone: (916) 671-1767

Record ID: 340110AP Service Type: NON Target Population: 1.3

7/31/2018 Expiration Date: IMS: No

Program Name: DIAMOND HOUSE DETOX

Legal Name: PSYCHNP CONSULTANTS, INC. Address: 8624 DIAMOND OAK WAY City, State Zip: ELK GROVE, CA 95624 Phone: (425) 941-2436

Record ID: 340111AP RES-DETOX Service Type:

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: AKUA MIND & BODY

Legal Name: AKUA BEHAVIORAL HEALTH, INC. Address: 10087 TERRA LOMA DRIVE City, State Zip: RANCHO CORDOVA, CA 95670

(916) 368-7074 Phone: Fax: (916) 368-7090

Record ID: 340113AP

Service Type: RES Resident Capacity: 20 20 Total Occupancy: Target Population: 1.1

Expiration Date: 3/31/2019 TMS: Nο

Program Name: TLCS CO-OCCURRING DISORDERS TREATMENT PROGRAM

Legal Name: TLCS, INC.

Address: 650 HOWE AVENUE, BLDG. 400

City, State Zip: SACRAMENTO, CA 95825

Phone: (916) 441-0123 Fax: (916) 441-6893

Record ID: 340114AN

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

State of California, Department of Health Care Services Licensed Residential Facilities and/or Certified Alcohol and Drug Programs

As of 11/1/2017

San Benito County

Program Name: Legal Name: Address: SAN BENITO COUNTY BEHAVIORAL HEALTH SAN BENITO COUNTY BEHAVIORAL HEALTH

1131 SAN FELIPE ROAD City, State Zip: HOLLISTER, CA 95023

Phone: (831) 636-4020 Fax: (831) 636-4015

Record ID: 350001AN

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name:BRIGHT FUTURE RECOVERY, INC.Legal Name:BRIGHT FUTURE RECOVERY, INC.Address:1000 FAIRVIEW ROAD

City, State Zip: HOLLISTER, CA 95023 Phone: (831) 245-7736

Record ID: 350002AP Service Type: RES-DETOX

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

6/30/2019 IMS: No Expiration Date:

State of California, Department of Health Care Services Licensed Residential Facilities and/or Certified Alcohol and Drug Programs

As of 11/1/2017

San Bernardino County

Program Name: RECOVERY CENTER

INLAND VALLEY DRUG AND ALCOHOL RECOVERY SERVICES Legal Name:

934 NORTH MOUNTAIN AVENUE, Address:

SUITES A, B, C AND D

UPLAND, CA 91786 City, State Zip: Phone: (909) 949-4667

Record ID: 360001AAN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

INLAND VALLEY RECOVERY SERVICES - SAN BERNARDINO RECOVERY CENTER

Program Name: INLAND VALLEY RECOVERY SERVICES - SAN BERNARDING RECOVERY Legal Name: INLAND VALLEY DRUG AND ALCOHOL RECOVERY SERVICES
Address: 939 N. D STREET, BUILDINGS A & B AND 955 N. D STREET

City, State Zip: SAN BERNARDINO, CA 92410

Phone: (909) 889-6519 Fax: (909) 889-6560

Record ID: 360001ABN

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: WOMEN'S AND MEN'S RESIDENTIAL SERVICES

Legal Name: INLAND VALLEY DRUG AND ALCOHOL RECOVERY SERVICES

Address: 1260 ARROW HIGHWAY, BUILDING B & C

Address: 1260 ARROW HIGHWAY, BUILDING B & C

City, State Zip: UPLAND, CA 91786

Phone: (909) 932-1069 Fax: (909) 932-1087

Record ID: 360001ZN Service Type: RES-DETOX Resident Capacity: 130 Total Occupancy: 130 Target Population: 1.4

Expiration Date: 2/28/2018 IMS: No

Program Name: Legal Name: Address: CEDAR HOUSE LIFE CHANGE CENTER SOCIAL SCIENCE SERVICES, INC.

18612 SANTA ANA AVENUE City, State Zip: BLOOMINGTON, CA 92316

Phone: (909) 421-7120

Record ID: 360002CN Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2018 TMS: No

Program Name:
Legal Name:
Address: CEDAR HOUSE LIFE CHANGE CENTER SOCIAL SCIENCE SERVICES, INC.

Address: 18612 SANTA ANA AVENUE City, State Zip: BLOOMINGTON, CA 92316

(909) 421-7120 Phone:

Record ID: 360002DN Service Type: RES Resident Capacity: 125 125 Total Occupancy: Target Population: 1.1

Expiration Date: 1/31/2018 IMS: Nο Program Name: CEDAR HOUSE LIFE CHANGE CENTER
Legal Name: SOCIAL SCIENCE SERVICES, INC.

Address: 10888 MAPLE AVENUE City, State Zip: BLOOMINGTON, CA 92316

Phone: (909) 873-0478 Fax: (909) 421-7128

Record ID: 360002FN
Service Type: RES
Resident Capacity: 11
Total Occupancy: 26

Target Population: 1.4

Expiration Date: 10/31/2019 IMS: No

Program Name: ST. JOHN OF GOD HEALTH CARE SERVICES
Legal Name: ST. JOHN OF GOD HEALTH CARE SERVICES

Address: 13333 PALMDALE ROAD City, State Zip: VICTORVILLE, CA 92392

Phone: (760) 241-4917 **Record ID: 360003HN**Service Type: RES-DETOX

Resident Capacity: 66 Total Occupancy: 82 Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: ST. JOHN OF GOD HEALTH CARE SERVICES
Legal Name: ST. JOHN OF GOD HEALTH CARE SERVICES

Address: 15534 6TH STREET City, State Zip: VICTORVILLE, CA 92392

Phone: (760) 241-4917 Fax: (760) 241-8911

Record ID: 360003IN
Service Type: NON
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: GIBSON HOUSE FOR MEN

Legal Name: VARP, INC.

Address: 1100, 1078 AND 1094 NORTH D STREET, AND 1087 NORTH STODDARD STREET

City, State Zip: SAN BERNARDINO, CA 92410

Phone: (909) 381-3774

Record ID: 360004BN
Service Type: RES
Resident Capacity: 58
Total Occupancy: 61
Target Population: 1.2

Expiration Date: 8/31/2018 IMS: No

Program Name: GIBSON HOUSE RECOVERY CENTER FOR WOMEN

Legal Name: VARP, INC.

Address: 1103, 1107, 1069, 1135, 1139, NORTH D STREET AND

382 & 384 11TH STREET SAN BERNARDINO, CA 92410

Phone: (909) 888-6956

Record ID: 360004FN

Service Type: RES
Resident Capacity: 53
Total Occupancy: 62
Target Population: 1.3

City, State Zip:

Expiration Date: 8/31/2018 IMS: No

Program Name: VARP, INC. OUTPATIENT PROGRAM

Legal Name: VARP, INC.

Address: 1149 NORTH D STREET City, State Zip: SAN BERNARDINO, CA 92410

Phone: (909) 381-3774 Fax: (909) 381-6845

Record ID: 360004TN

Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: PINE RIDGE TREATMENT CENTER

Legal Name: PINE RIDGE TREATMENT CENTER, INCORPORATED

2727 HIGHLAND DRIVE Address:

City, State Zip: RUNNING SPRINGS, CA 92382

(909) 867-7028 Phone:

Record ID: 360007AP Service Type: RES Resident Capacity: 24 Total Occupancy: 24 Target Population: 1.2

Expiration Date: 9/30/2017 IMS: No

Program Name: PINE RIDGE TREATMENT CENTERS, INC. - VICTORVILLE

Legal Name: PINE RIDGE TREATMENT CENTER, INCORPORATED

Address: 15367 BONANZA ROAD, #A City, State Zip: VICTORVILLE, CA 92392

(760) 955-1012 Fax: Phone: (760) 955-4811

Record ID: 360007BP Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

PINE RIDGE TREATMENT CENTERS, INC. - SAN BERNARDINO Program Name:

Legal Name: PINE RIDGE TREATMENT CENTER, INCORPORATED Address: 1881 COMMERCENTER DRIVE EAST, SUITE 220

City, State Zip: SAN BERNARDINO, CA 92408

Phone: (909) 890-0294

Record ID: 360007CP Service Type: NON

Target Population: 1.1

Expiration Date: 9/30/2019 IMS:

PINE RIDGE TREATMENT CENTER - LUCERNE VALLEY Program Name: Legal Name: PINE RIDGE TREATMENT CENTERS, INCORPORATED

Address: 9401 CRYSTAL CREEK ROAD City, State Zip: LUCERNE VALLEY, CA 92356

(760) 248-9199 Phone:

Record ID: 360007DP RES-DETOX Service Type:

Resident Capacity: 24 Total Occupancy: 2.4 Target Population: 1.1

6/30/2018 Expiration Date: IMS: No

Program Name: MFI RECOVERY CENTER Legal Name: MFI RECOVERY CENTER

250 S. G STREET, 2ND FLOOR Address:

SUITES 1, 2, 5, 6, 7, GROUP ROOM 1 AND 2

SAN BERNARDINO, CA 92410-3320 City, State Zip:

Phone: (951) 683-6596

360008AN Record ID: Service Type: NON Target Population: 1.1

9/30/2019 IMS: Expiration Date: No

MFI RECOVERY CENTER Program Name: Legal Name: MFI RECOVERY CENTER Address: 1455 3RD STREET

City, State Zip: SAN BERNARDINO, CA 92408-0218

Phone: (951) 683-6596 Fax: (951) 351-1554

Record ID: 360008BN

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No Program Name: INLAND BEHAVIORAL AND HEALTH SERVICES, INC.
Legal Name: INLAND BEHAVIORAL AND HEALTH SERVICES, INC.

Address: 1963 NORTH E STREET
City, State Zip: SAN BERNARDINO, CA 92405

Phone: (909) 881-6146 Fax: (909) 881-0111

Record ID: 360015AN
Service Type: NON
Target Population: 1.1

Expiration Date: 11/30/2019 IMS: No

Program Name:MATRIX INSTITUTE ON ADDICTIONSLegal Name:MATRIX INSTITUTE ON ADDICTIONS

Address: 11777 SEBASTIAN WAY, SUITES 102 A & B

City, State Zip: RANCHO CUCAMONGA, CA 91730

Phone: (909) 989-9724

Record ID: 360020AN
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: DAP RECOVERY HOME

Legal Name: DRUG ALTERNATIVE PROGRAM
Address: 11805 AND 11816 ARLISS LANE
City, State Zip: GRAND TERRACE, CA 92313

Phone: (909) 783-1094

Record ID: 360021BN
Service Type: RES
Resident Capacity: 12
Total Occupancy: 13
Target Population: 1.2

Expiration Date: 8/31/2019 IMS: No

Program Name: HIGH DESERT CHILD ADOLESCENT AND FAMILY SERVICES CENTER

Legal Name: HIGH DESERT CHILD ADOLESCENT AND FAMILY SERVICES CENTER, INCORPORATED

Address: 16248 VICTOR STREET City, State Zip: VICTORVILLE, CA 92395

Phone: (760) 243-7151 Fax: (760) 952-1432

Record ID: 360030AN

Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: HIGH DESERT CHILD ADOLESCENT AND FAMILY SERVICES CENTER, INC.

Legal Name: HIGH DESERT CHILD ADOLESCENT AND FAMILY SERVICES CENTER, INCORPORATED

Address: 225 BARSTOW ROAD
City, State Zip: BARSTOW, CA 92311
Phone: (760) 243-7151

Record ID: 360030BN
Service Type: NON
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: PRIDE

Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 1874 BUSINESS DRIVE, SUITE B
City, State Zip: SAN BERNARDINO, CA 92408

Phone: (858) 573-2600 Fax: (858) 573-5144

Record ID: 360033AN

Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: VICTOR VALLEY CENTER FOR CHANGE

Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 15770 MOJAVE DRIVE, SUITES K & L

City, State Zip: VICTORVILLE, CA 92394

Phone: (858) 573-2600 Fax: (858) 573-5144

Record ID: 360033BN

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: REDLANDS CENTER FOR CHANGE
Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 1874 BUSINESS CENTER DRIVE, SUITE C

City, State Zip: SAN BERNARDINO, CA 92408

Phone: (858) 573-2600 Fax: (909) 335-1701

Record ID: 360033DN Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: CENTRAL VALLEY REGIONAL RECOVERY CENTER

Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 1076 SANTO ANTONIO DRIVE, SUITES B, C & D

City, State Zip: COLTON, CA 92324

Phone: (858) 573-2600 Fax: (909) 433-9824

Record ID: 360033HN
Service Type: NON
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: NEEDLES CENTER FOR CHANGE
Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 300 H STREET City, State Zip: NEEDLES, CA 92363

Phone: (858) 573-2600 Fax: (858) 573-5144

Record ID: 360033IN
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: FONTANA CENTER FOR CHANGE
Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 1076 SANTO ANTONIO DRIVE, SUITES B & D, ROOMS 2, 4 & 9

City, State Zip: COLTON, CA 92324

Phone: (858) 573-2600 Fax: (858) 573-5144

Record ID: 360033JN

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: SAN BERNARDINO CENTER FOR CHANGE

Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 1874 BUSINESS CENTER DRIVE, SUITE A

City, State Zip: SAN BERNARDINO, CA 92408

Phone: (858) 573-2600 Fax: (909) 386-0529

Record ID: 360033MN

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: BIG BEAR CENTER FOR CHANGE
Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 41945 BIG BEAR BOULEVARD, SUITE 208

City, State Zip: BIG BEAR LAKE, CA 92315

Phone: (909) 878-0105 Fax: (909) 878-0105

Record ID: 360033NN

Service Type: NON Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: YUCCA VALLEY CENTER FOR CHANGE

Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 58945 BUSINESS CENTER DRIVE, SUITES J, N & P

City, State Zip: YUCCA VALLEY, CA 92284

Phone: (909) 872-0223 Fax: (909) 872-1686

Record ID: 3600330N

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

JOSHUA TREE CENTER FOR CHANGE Program Name: Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 61607 29 PALMS HIGHWAY, SUITE C & D

City, State Zip: JOSHUA TREE, CA 92252

Phone: (909) 872-0223 Fax: (909) 872-1686

Record ID: 360033PN Service Type: NON Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: RIM FAMILY SERVICES Legal Name: RIM FAMILY SERVICES, INC.

Address: 28545 HIGHWAY 18 City, State Zip: SKY FOREST, CA 92385

Phone: (909) 336-1800 Fax: (909) 336-0990

Record ID: 360036AN Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

RIALTO BEHAVIORAL ADDICTION TREATMENT SERVICES Program Name:

Legal Name: SAN BERNARDINO COUNTY BEHAVIORAL HEALTH DEPARTMENT Address: 850 E. FOOTHILL BOULEVARD, SUITE A, SECTIONS A-F

City, State Zip: RIALTO, CA 92376

Phone: (909) 421-9465 Fax: (909) 421-9457

Record ID: 360050AN Service Type: NON

Target Population: 1.4

Expiration Date: 5/31/2019 IMS: No

SAN BERNARDINO COUNTY - BARSTOW ADS Program Name:

Legal Name: SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

Address: 1841 E. MAIN STREET City, State Zip: BARSTOW, CA 92311

Phone: (760) 255-5700 Fax: (760) 256-5092

Record ID: 360050EN Service Type: NON Target Population: 1.1

9/30/2019 Expiration Date: TMS: No

MARIPOSA COMMUNITY COUNSELING Program Name:

Legal Name: SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

Address: 2940 INLAND EMPIRE BOULEVARD

City, State Zip: ONTARIO, CA 91764

Phone: (909) 933-6341 Fax: (909) 933-6355

Record ID: 360050HN

Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

SUPERVISED TREATMENT AFTER RELEASE PROGRAM (STAR) Program Name: Legal Name: SAN BERNARDINO COUNTY BEHAVIORAL HEALTH DEPARTMENT

Address: 1330 EAST COOLEY DRIVE, ROOMS 106, 119, 129, 131, 137, 200, 201, 203, 205,

206, LOBBY AND CLERICAL AREA

COLTON, CA 92324 City, State Zip:

Phone: (909) 423-0750 Fax: (909) 423-0760

Record ID: 360050IN Service Type: NON Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

FONTANA CHOICE SUBSTANCE USE DISORDER TREATMENT Program Name:

Legal Name: COUNTY OF SAN BERNARDINO, DEPARTMENT OF BEHAVIORAL HEALTH

Address: 17830 ARROW BOULEVARD City, State Zip: FONTANA, CA 92335 Phone: (909) 463-7556

Record ID: 360050JN Service Type: NON Target Population: 1.1

IMS: Expiration Date: 2/28/2019 No

VICTORVILLE CHOICE SUBSTANCE USE DISORDER TREATMENT Program Name:

Legal Name: COUNTY OF SAN BERNARDINO, DEPARTMENT OF BEHAVIORAL HEALTH

15480 RAMONA AVENUE Address:

City, State Zip: VICTORVILLE, CA 92392-2421

Phone: (760) 243-8145 Fax: (909) 388-0898

Record ID: 360050KN Service Type: NON Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: RIVERSIDE-SAN BERNARDINO COUNTY INDIAN HEALTH, INC. (SAN MANUEL CLINIC)

RIVERSIDE-SAN BERNARDINO COUNTY INDIAN HEALTH, INC. Legal Name:

Address: 11980 MOUNT VERNON AVENUE City, State Zip: GRAND TERRANCE, CA 92313

(951) 849-9633 Phone: (951) 864-1097 Fax:

Record ID: 360058AN Service Type: NON Target Population: 1.8

Expiration Date: 4/30/2019 IMS: No

COLTON CLINICAL SERVICES Program Name:

Legal Name: WCHS, INC.

Address: 2275 EAST COOLEY DRIVE

City, State Zip: COLTON, CA 92324

Phone: (909) 370-1777 Fax: (909) 370-1776

Record ID: 360066AP

Service Type: NON

Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

TIME FOR CHANGE FOUNDATION Program Name: Legal Name: TIME FOR CHANGE FOUNDATION Address: 2164 N. MOUNTAIN VIEW AVENUE City, State Zip: SAN BERNARDINO, CA 92405

Phone: (909) 886-2994 Fax: (909) 886-0218

Record ID: 360071AN

Service Type: NON Target Population: 1.3

6/30/2019 Expiration Date: TMS: No

NEW CREATION ADDICTION TREATMENT CENTER Program Name:

Legal Name: G AND C SWAN INC.

11646 ENCANTO LANE AND 23950 PRADO LANE Address:

City, State Zip: COLTON, CA 92324

Phone: (909) 981-6121 Fax: (909) 944-0192

Record ID: 360075AP RES-DETOX Service Type:

Resident Capacity: 16 Total Occupancy: 16 Target Population: 1.1

4/30/2018 Expiration Date: IMS: No

HIS HOUSE Program Name:

G AND C SWAN INC. Legal Name:

239 AND 215 WEST 9TH STREET, SUITE I, J AND K, AND Address:

227 NORTH PALM AVENUE

City, State Zip: UPLAND, CA 91786

(909) 981-6121 Fax: (909) 944-0192 Phone:

Record ID: 360075BP RES-DETOX Service Type:

Resident Capacity: 30 Total Occupancy: 31 Target Population: 1.2

Expiration Date: 4/30/2018 IMS: No Program Name: HIS HOUSE

Legal Name: G AND C SWAN INC. Address: 1354 CARLOS PLACE City, State Zip: ONTARIO, CA 91764

Phone: (909) 519-0767 Fax: (909) 944-0192

Record ID: 360075CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 12/31/2018 IMS: No

Program Name: NEW CREATION ADDICTION TREATMENT CENTER

Legal Name: G AND C SWAN INC.
Address: 9531 PITTSBURGH AVENUE
City, State Zip: RANCHO CUCOMUNGA, CA 91786

Phone: (909) 241-7219 Fax: (909) 985-2316

Record ID: 360075DP
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: ABOVE IT ALL TREATMENT CENTER

Legal Name: HI-LAND MOUNTAIN HOMES, INC.

Address: 27482 NORTH BAY ROAD
City, State Zip: LAKE ARROWHEAD, CA 92352

Phone: (909) 338-1234 Fax: (909) 744-8938

Record ID: 360082BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: ABOVE IT ALL TREATMENT CENTER

Legal Name: HI-LAND MOUNTAIN HOMES, INC

Address: 23739 LAKE DRIVE
City, State Zip: CRESTLINE, CA 92325
Phone: (202) 294-1554

Record ID: 360082DP Service Type: NON

Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: SERENITY LODGE
Legal Name: SERENITY LODGE

Address: 974, 985, 986, 977, 995 & 1010 MEADOWBROOK ROAD;

1032 CEDAR LANE AND 1000 PINE COURT, LAKE ARROWHEAD, CA

City, State Zip: CREST PARK, CA 92326

Phone: (909) 294-3913 Fax: (909) 294-3913

Record ID: 360091AP

Service Type: RES Resident Capacity: 48 Total Occupancy: 48 Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: CREEKSIDE RANCH TREATMENT CENTER

Legal Name: COVENANT HEALTH SERVICES
Address: 2730 MILL CREEK ROAD
City, State Zip: MENTONE, CA 92359-0000

Phone: (909) 794-2027 Fax: (909) 794-2027

Record ID: 360092AN Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: NEW CREATION

Legal Name: NEW CREATION BEHAVIORAL HEALTHCARE FOUNDATION

Address: 2511 S MCCARTY DRIVE City, State Zip: COLTON, CA 92324

Phone: (909) 519-0767 Fax: (909) 985-2316

Record ID: 360096AN

Service Type: RES Resident Capacity: 10 Total Occupancy: 10 Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: MERITO HOUSE
Legal Name: MERITO HOUSE, LLC
Address: 911 CHURCH STREET
City, State Zip: REDLANDS, CA 92372

Phone: (909) 981-6121 Fax: (909) 985-2316

Record ID: 360098AP
Service Type: RES-DETOX

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.2

Expiration Date: 11/30/2018 IMS: No

Program Name: BENCHMARK TRANSITIONS

Legal Name: BENCHMARK YOUNG ADULT SCHOOL, INC.

Address: 36442 WILDWOOD CANYON ROAD

City, State Zip: YUCAIPA, CA 92399

Phone: (800) 474-4848 Fax: (909) 748-6424

Record ID: 360099AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: BENCHMARK TRANSITIONS

Legal Name: BENCHMARK YOUNG ADULT SCHOOL, INC.

Address: 1971 ESSEX COURT
City, State Zip: REDLANDS, CA 92373
Phone: (800) 474-4848

Record ID: 360099BP
Service Type: NON-DETOX
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: BENCHMARK TRANSITIONS AT PANORAMA RIDGE

Legal Name: BENCHMARK YOUNG ADULT SCHOOL, INC.

Address: 35826 PANORAMA DRIVE City, State Zip: YUCAIPA, CA 92399

Phone: (800) 474-4848 Fax: (909) 793-4499

Record ID: 360099CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: REVIVAL RECOVERY SERVICES
Legal Name: REVIVAL RECOVERY SERVICES
Address: 12350 INDIAN RIVER DRIVE
City, State Zip: APPLE VALLEY, CA 92308

Phone: (760) 887-1632 Fax: (760) 961-8173

Record ID: 360103AN

Service Type: RES
Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.2

Expiration Date: 6/30/2019 IMS: No

Program Name: NEW ORIGINS Legal Name: NEW ORIGINS, LLC

Address: 101 E. REDLANDS BOULEVARD, SUITE 200

City, State Zip: REDLANDS, CA 92373

Phone: (955) 984-1788 Fax: (909) 335-2804

Record ID: 360105AP
Service Type: NON
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: DBA: JOSHUA TREE RECOVERY HOME

Legal Name: AMERICAN HEALTH SERVICES LLC

Address: 65675 SULLIVAN ROAD City, State Zip: JOSHUA TREE, CA 92252

Phone: (916) 802-7002

Record ID: 360106AP
Service Type: RES-DETOX

Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.2

Expiration Date: 5/31/2018 IMS: No

Program Name: BLUESTONE MANOR

Legal Name: BLUESTONE RECOVERY, INC.
Address: 29556 HOOK CREEK ROAD
City, State Zip: CEDAR GLEN, CA 92321-0400

Phone: (951) 536-2213 Fax: (909) 074-4839

Record ID: 360107BP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.2

Expiration Date: 2/28/2019 IMS: No

Program Name: FIRST STEP RECOVERY CENTER

Legal Name: ROUTE 66 RECOVERY PARTNERS, A MEDICAL CORPORATION

Address: 12402 INDUSTRIAL BOULEVARD,

B-6

City, State Zip: VICTORVILLE, CA 92395

Phone: (760) 780-1237 Fax: (877) 780-3252

Record ID: 360108AP
Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: LAKE ARROWHEAD RECOVERY CENTER
Legal Name: LAKE ARROWHEAD RECOVERY CENTER, LLC

Address: 28729 PALISADES DRIVE,

BUILDING A & B

City, State Zip: LAKE ARROWHEAD, CA 92352

Phone: (435) 590-4147 Record ID: 360109AP

Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: HARVEY HOUSE MANOR I

Legal Name: HARVEY HOUSE INC

Address: 3512 AND 3515 NOLAN STREET City, State Zip: SAN BERNARDINO, CA 92407

Phone: (951) 347-3672 Fax: (951) 934-6166

Record ID: 360111AP

Service Type: RES
Resident Capacity: 12
Total Occupancy: 12
Target Population: 1.2

Expiration Date: 12/31/2018 IMS: No

HARVEY HOUSE MANOR II Program Name:

Legal Name: HARVEY HOUSE INC

Address: 11372 SAN JUAN STREET UPPER, UNITS A AND B

City, State Zip: LOMA LINDA, CA 92564

(951) 347-3672 Fax: (951) 934-6166 Phone:

Record ID: 360111BP RES Service Type: Resident Capacity: 8

Total Occupancy: 8
Target Population: 1.2

12/31/2018 Expiration Date: IMS:

Program Name: TOO BE FREE RECOVERY INCORPORATED Legal Name: TOO BE FREE RECOVERY INCORPORATED 1799 N. WATERMAN AVE, SUITE F Address:

City, State Zip: SAN BERNARDINO, CA 92504

(951) 347-3672 Fax: (951) 934-6166 Phone:

Record ID: 360112AN Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: HOWER LODGE Legal Name: HOWER LODGE

Address: 26166 CIRCLE DRIVE

City, State Zip: LAKE ARROWHEAD, CA 92352

(909) 744-9271 Phone:

Record ID: 360113AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 7 Target Population: 1.3

Expiration Date: 6/30/2019 IMS: No

DYNAMIC TRANSFORMATIONS, LLC Program Name: Legal Name: DYNAMIC TRANSFORMATIONS, LLC

Address: 1247 CANTANIA

City, State Zip: REDLANDS, CA 92374

Phone: (800) 417-0485 Fax: (909) 335-2804

Record ID: 360115AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 10/31/2019 IMS: Nο

State of California, Department of Health Care Services Licensed Residential Facilities and/or Certified Alcohol and Drug Programs

As of 11/1/2017

San Diego County

Program Name: HOPE CANYON RECOVERY

Legal Name: HOPE CANYON RECOVERY, INC.

Address: 2821 LANGE AVENUE
City, State Zip: SAN DIEGO, CA 92122
Phone: (786) 709-7912

Record ID: 370001AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: CROSSROADS FOUNDATION
Legal Name: THE CROSSROADS FOUNDATION

Address: 3594 FOURTH AVENUE City, State Zip: SAN DIEGO, CA 92103

Phone: (619) 296-1151 Fax: (619) 296-6218

Record ID: 370002AN

Service Type: RES
Resident Capacity: 20
Total Occupancy: 22
Target Population: 1.3

Expiration Date: 6/30/2019 IMS: No

Program Name: HEARTLAND HOUSE

Legal Name: THE TWELFTH STEP HOUSE OF SAN DIEGO

Address: 5855 AND 5860 (APT 2 & 3) STREAMVIEW DRIVE

City, State Zip: SAN DIEGO, CA 92105

Phone: (619) 287-5460 Fax: (619) 287-5040

Record ID: 370003AN

Service Type: RES
Resident Capacity: 28
Total Occupancy: 28
Target Population: 1.2

Expiration Date: 9/30/2019 IMS: No

Program Name: SAN DIEGO FREEDOM RANCH
Legal Name: SAN DIEGO FREEDOM RANCH, INC.
Address: 1777 BUCKMAN SPRINGS ROAD

City, State Zip: CAMPO, CA 91906

Phone: (619) 478-5696 Fax: (619) 478-2404

Record ID: 370004AN

Service Type: RES
Resident Capacity: 50
Total Occupancy: 60
Target Population: 1.2

Expiration Date: 10/31/2019 IMS: No

Program Name: JR RANCH

Legal Name: SAN DIEGO FREEDOM RANCH, INC. Address: 1765 BUCKMAN SPRINGS ROAD

City, State Zip: CAMPO, CA 91906

Phone: (619) 478-5696 Fax: (619) 478-2404

Record ID: 370004BN

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 8/31/2019 IMS: No

Program Name: SERENITY CENTER Legal Name: HEALTHRIGHT 360

1341 NORTH ESCONDIDO BOULEVARD Address:

City, State Zip: ESCONDIDO, CA 92026 Phone: (760) 747-1015

Record ID: 370005GN

Service Type: RES Resident Capacity: 120 Total Occupancy: 140 Target Population: 1.3

Expiration Date: 5/31/2018 IMS: No

Program Name: **PATHFINDERS**

Legal Name: PATHFINDERS OF SAN DIEGO

Address: 2952 AND 2980 CEDAR STREET, AND 1530 DALE STREET

City, State Zip: SAN DIEGO, CA 92102

Phone: (619) 239-7370 Fax: (619) 239-1817

Record ID: 370006AN

Service Type: RES Resident Capacity: 42 Total Occupancy: 44 Target Population: 1.2

Expiration Date: 7/31/2018 IMS: No

Program Name: AMIGOS SOBRIOS

VOLUNTEERS OF AMERICA, SOUTHWEST CALIFORNIA, INCORPORATION Legal Name:

Address: 741 11TH AVENUE City, State Zip: SAN DIEGO, CA 92101

Phone: (619) 232-7754 Fax: (619) 282-8262

Record ID: 370007BN

Service Type: RES Resident Capacity: 18 Total Occupancy: 18 Target Population: 1.2

IMS: Expiration Date: 10/31/2019 No

RENAISSANCE TREATMENT CENTER Program Name:

Legal Name: VOLUNTEERS OF AMERICA, SOUTHWEST CALIFORNIA, INCORPORATION

Address: 2300 EAST 7TH STREET City, State Zip: NATIONAL CITY, CA 91950

Phone: (619) 791-2730 Fax: (619) 282-8262

Record ID: 370007CN Service Type: RES-DETOX Resident Capacity: 120

Total Occupancy: 120 Target Population: 1.8

Expiration Date: 4/30/2018 IMS: No

STEPPING STONE OF SAN DIEGO Program Name:

Legal Name: THE STEPPING STONE OF SAN DIEGO

Address: 3767 CENTRAL AVENUE City, State Zip: SAN DIEGO, CA 92105

Phone: (619) 584-4010 Fax: (619) 521-1701

Record ID: 370008DN

Service Type: RES Resident Capacity: 31 Total Occupancy: 31 Target Population: 1.8

Expiration Date: 5/31/2018

Program Name: THE FELLOWSHIP CENTER

Legal Name: THE FELLOWSHIP CENTER, INC.

737 AND 745 EAST GRAND AVENUE, 726 AND 736 EAST 2ND AVENUE, Address:

AND 123 SOUTH ELM STREET

City, State Zip: ESCONDIDO, CA 92025

Phone: (760) 745-8478 Fax: (760) 745-6852

Record ID: 370009AN Service Type: RES-DETOX Resident Capacity: 113 Total Occupancy: 113

Target Population: 1.2

7/31/2018 IMS: Expiration Date: No Program Name: VETERANS VILLAGE OF SAN DIEGO REHABILITATION CENTER

Legal Name: VIETNAM VETERANS OF SAN DIEGO

Address: 4115, 4125, 4137, & 4141 PACIFIC HIGHWAY AND 3670 COUTS STREET

City, State Zip: SAN DIEGO, CA 92110

Phone: (619) 497-0142 Fax: (619) 497-0263

Record ID: 370010BN

Service Type: RES Resident Capacity: 242 Total Occupancy: 242 Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: THE WAY BACK
Legal Name: THE WAY BACK
Address: 2516 A STREET

City, State Zip: SAN DIEGO, CA 92102-2199

Phone: (619) 235-0592 Fax: (619) 235-0593

Record ID: 370011AN

Service Type: RES
Resident Capacity: 27
Total Occupancy: 29
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: TRADITION ONE-MEN

Legal Name: TRADITION ONE

Address: 4104, 4114 AND 4124 DELTA STREET

City, State Zip: SAN DIEGO, CA 92113

Phone: (619) 264-0141 Fax: (619) 264-7274

Record ID: 370012AN

Service Type: RES Resident Capacity: 46 Total Occupancy: 49 Target Population: 1.2

Expiration Date: 2/28/2018 IMS: No

Program Name: TURNING POINT

Legal Name: THE TURNING POINT HOME OF SAN DIEGO

Address: 1315 25TH STREET City, State Zip: SAN DIEGO, CA 92102

Phone: (619) 233-0067 Fax: (619) 233-3990

Record ID: 370013AN

Service Type: RES
Resident Capacity: 20
Total Occupancy: 21
Target Population: 1.3

Expiration Date: 7/31/2019 IMS: No

Program Name: CASA DE MILAGROS

Legal Name: METROPOLITAN AREA ADVISORY COMMITTEE ON

ANTI-POVERTY OF SAN DIEGO COUNTY, INC.

Address: 1127 SOUTH 38TH STREET City, State Zip: SAN DIEGO, CA 92113

Phone: (619) 262-4002 Fax: (619) 426-2173

Record ID: 370014AN

Service Type: RES
Resident Capacity: 18
Total Occupancy: 18
Target Population: 1.4

Expiration Date: 9/30/2019 IMS: No

Program Name: NOSOTROS

Legal Name: METROPOLITAN AREA ADVISORY COMMITTEE ON ANTI-POVERTY OF SAN DIEGO COUNTY, INC.

Address: 73 NORTH 2ND AVENUE City, State Zip: CHULA VISTA, CA 91910

Phone: (619) 426-4801 Fax: (619) 426-4801

Record ID: 370014BN Service Type: RES Resident Capacity: 17 Total Occupancy: 17 Target Population: 1.2

Expiration Date: 9/30/2019 IMS: No

Program Name: HOUSE OF METAMORPHOSIS Legal Name: HOUSE OF METAMORPHOSIS, INC.

Address: 2970 MARKET STREET City, State Zip: SAN DIEGO, CA 92102

Phone: (619) 236-9492 Fax: (619) 236-9127

Record ID: 370021AN Service Type: RES Resident Capacity: 64 Total Occupancy: 64 Target Population: 1.1

Expiration Date: 11/30/2017 TMS: No

HOUSE OF METAMORPHOSIS TRANSITIONAL LIVING FACILITY Program Name:

Legal Name: HOUSE OF METAMORPHOSIS, INC.

Address: 2867 AND 2871 C STREET City, State Zip: SAN DIEGO, CA 92102

Phone: (619) 236-9217 Fax: (619) 236-9127

Record ID: 370021KN Service Type: RES Resident Capacity: 12 Total Occupancy: 12

Target Population: 1.1

Expiration Date: 3/31/2019 TMS: Nο

SHORT TERM I--MARLBOROUGH Program Name:

Legal Name: CRASH, INC.

Address: 4161 MARLBOROUGH AVENUE City, State Zip: SAN DIEGO, CA 92105

Phone: (619) 282-7274 Fax: (619) 282-7496

Record ID: 370024IN

Service Type: RES Resident Capacity: 50 Total Occupancy: 50 Target Population: 1.2

Expiration Date: 3/31/2019 IMS: Nο

Program Name: GOLDEN HILL HOUSE II

Legal Name: CRASH, INC. Address: 726 F STREET

City, State Zip: SAN DIEGO, CA 92101

(619) 239-0909 Phone: (619) 239-9691 Fax:

370024KN Record ID:

Service Type: RES Resident Capacity: 63 Total Occupancy: 63 Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: GOLDEN HILL HOUSE

Legal Name: CRASH, INC. Address: 2410 E STREET

City, State Zip: SAN DIEGO, CA 92102

(619) 234-3346 (619) 234-3357 Phone: Fax:

370024LN Record ID:

Service Type: RES Resident Capacity: 43 Total Occupancy: Target Population: 1.3

4/30/2019 IMS: Expiration Date: No Program Name: PEMARRO

Legal Name: GROUP CONSCIENCE Address: 1482 KINGS VILLA ROAD City, State Zip: RAMONA, CA 92065

(760) 789-8073 Phone: (760) 789-8070 Fax:

370025AN Record ID: Service Type: RES-DETOX

Resident Capacity: 10 Total Occupancy: 10 Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: CHOICES IN RECOVERY/FOUNDATION HOUSE

Legal Name: THE BETHESDA RECOVERY CENTER

Address: 619 CIVIC CENTER DRIVE

City, State Zip: VISTA, CA 92083

Phone: (760) 945-5290 (760) 945-7765 Fax:

Record ID: 370039IN Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 8 Target Population: 1.1

9/30/2018 TMS: Expiration Date: No

CHOICES IN RECOVERY - ALCOHOL AND DRUG ABUSE OUTPATIENT TREATMENT PROGRAM Program Name:

THE BETHESDA RECOVERY CENTER Legal Name: Address: 733 SOUTH SANTA FE AVENUE

City, State Zip: VISTA, CA 92083

Phone: (760) 945-5290 Fax: (760) 945-7765

Record ID: 370039JN Service Type: NON Target Population: 1.1

2/28/2019 Expiration Date: IMS: No

Program Name: CHOICES IN RECOVERY/NEW HOUSE THE BETHESDA RECOVERY CENTER Legal Name:

Address: 747 MELROSE PLACE

VISTA, CA 92083 City, State Zip:

Phone: (760) 945-5290 (760) 945-7765 Fax:

Record ID: 370039KN

Service Type: RES Resident Capacity: 6 Total Occupancy: 8 Target Population: 1.2

Expiration Date: 4/30/2019 TMS: No

CHOICES IN RECOVERY/HILL HOUSE Program Name: THE BETHESDA RECOVERY CENTER Legal Name:

Address: 1135 NORTH DRIVE City, State Zip: VISTA, CA 92083

(760) 945-5290 (760) 945-7765 Phone: Fax:

Record ID: 370039LN

Service Type: RES Resident Capacity: 6 Total Occupancy: 8 Target Population: 1.2

4/30/2019 IMS: Expiration Date: No

Program Name: CHOICES IN RECOVERY/HUMBLE HOUSE

Legal Name: THE BETHESDA RECOVERY CENTER

Address: 248 HILL DRIVE City, State Zip: VISTA, CA 92083

(760) 945-5290 Phone: Fax: (760) 945-7765

370039MN Record ID:

Service Type: RES Resident Capacity: 6 Total Occupancy: 8 Target Population: 1.3

IMS: Expiration Date: 4/30/2019 No Program Name: MCALISTER INSTITUTE SOUTH BAY REGIONAL RECOVERY CENTER

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Address: 1180 3RD AVENUE, SUITES C-3, C-4 AND C-5

City, State Zip: CHULA VISTA, CA 91911

Phone: (619) 691-8164
Record ID: 370045ABN

Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: SOUTH TEEN RECOVERY CENTER

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Address: 629 THIRD AVENUE, SUITE C City, State Zip: CHULA VISTA, CA 91910-5741

Phone: (619) 691-1045 Fax: (619) 691-1491

Record ID: 370045ACN

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: NORTH CENTRAL TEEN RECOVERY CENTER

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Address: 7625 MESA COLLEGE DRIVE, SUITE 115B

City, State Zip: SAN DIEGO, CA 92111

Phone: (858) 277-4633 Fax: (858) 277-4933

Record ID: 370045AEN

Service Type: NON

Target Population: 1.13

Expiration Date: 8/31/2019 IMS: No

Program Name: MCALISTER INSTITUTE EAST TEEN RECOVERY CENTER

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Address: 550 FESLER STREET, SUITE G1 AND G2

City, State Zip: EL CAJON, CA 92020

Phone: (619) 588-5361 Fax: (619) 588-5421

Record ID: 370045AMN

Service Type: NON Target Population: 1.5

Expiration Date: 4/30/2019 IMS: No

Program Name: NORTH COASTAL REGIONAL RECOVERY CENTER

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Address: 2821 OCEANSIDE BOULEVARD City, State Zip: OCEANSIDE, CA 92054 Phone: (760) 721-2781

Record ID: 370045AN
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: NEW HOPE TEEN RECOVERY CENTER

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Address: 1212 S. 43RD STREET, SUITE C, D, AND E

City, State Zip: SAN DIEGO, CA 92113

Phone: (619) 263-1790 Fax: (619) 263-1793

Record ID: 370045APN

Service Type: NON Target Population: 1.5

Expiration Date: 11/30/2019 IMS: No

Program Name: NORTH INLAND WOMEN/ADOLESCENT RECOVERY CENTER

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Address: 751 RANCHEROS DRIVE, SUITE 3, 4, AND 5

City, State Zip: SAN MARCOS, CA 92069

Phone: (760) 761-0515 Fax: (760) 761-0464

Record ID: 370045AQN

Service Type: NON Target Population: 1.5

Expiration Date: 10/31/2019 IMS: No

NORTH COASTAL TEEN RECOVERY CENTER Program Name:

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Address: 3923 WARING ROAD, SUITE D

City, State Zip: OCEANSIDE, CA 92056

Phone: (760) 726-4451 Fax: (760) 726-4465

Record ID: 370045ARN

Service Type: NON Target Population: 1.10

Expiration Date: 1/31/2018 IMS: No

Program Name: NORTH COASTAL TEEN RECOVERY CENTER

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Address: 3921 WARING ROAD, SUITE A

City, State Zip: OCEANSIDE, CA 92056

Fax: Phone: (760) 726-4451 (760) 726-4465

Record ID: 370045ASN

Service Type: NON Target Population: 1.10

Expiration Date: 7/31/2019 IMS: No

Program Name: MCALISTER INSTITUTE SOUTH BAY WOMEN'S RECOVERY CENTER

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Address: 2414 HOOVER AVENUE, SUITES A, B, C

City, State Zip: NATIONAL CITY, CA 91950

Phone: (619) 336-1226 (619) 477-1052 Fax:

Record ID: 370045BN

Service Type: NON

Target Population: 1.3

Expiration Date: 4/30/2018 IMS: No

EAST COUNTY REGIONAL RECOVERY CENTER Program Name:

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Address: 1365 NORTH JOHNSON AVENUE, SUITES 111 AND 113

City, State Zip: EL CAJON, CA 92020

Phone: (619) 440-4801 Ext:1592 Fax: (619) 442-1592

Record ID: 370045DN

Service Type: NON Target Population: 1.1

4/30/2018 Expiration Date: TMS: No

MCALISTER INSTITUTE - LEMON GROVE FACILITY Program Name:

MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC. Legal Name:

Address: 2049 SKYLINE DRIVE City, State Zip: LEMON GROVE, CA 91945

Phone: (619) 465-7303

Record ID: 370045FN Service Type: RES-DETOX

Resident Capacity: 155 Total Occupancy: 180 Target Population: 1.9

Expiration Date: 4/30/2018 IMS:

MCALISTER INSTITUTE GROUP HOME-EAST Program Name:

MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC. Legal Name:

2219 ODESSA COURT Address: City, State Zip: LEMON GROVE, CA 91945

Phone: (619) 461-4871

Record ID: 370045MN Service Type: DSS Target Population: 1.5

Expiration Date: 11/30/2018 IMS:

Program Name: MCALISTER INSTITUTE GROUP HOME NORTH

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Address: 323 HUNTER STREET City, State Zip: RAMONA, CA 92065

Phone: (760) 789-0571 Fax: (760) 789-0577

Record ID: 370045QN Service Type: DSS

Target Population: 1.5

Expiration Date: 4/30/2019 IMS: No Program Name: EAST COUNTY REGIONAL RECOVERY CENTER

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Address: 1385 NORTH JOHNSON AVENUE, SUITES 102/103

City, State Zip: EL CAJON, CA 92020 Phone: (619) 440-4801

Record ID: 370045TN
Service Type: NON
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: MCALISTER INSTITUTE GROUP HOME - SOUTH

Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.

Address: 2315 BAR BIT ROAD

City, State Zip: SPRING VALLEY, CA 91978

Phone: (619) 442-0277 Fax: (619) 337-3610

Record ID: 370045VN
Service Type: DSS
Target Population: 1.5

Expiration Date: 5/31/2018 IMS: No

Program Name: AMITY FOUNDATION OF CALIFORNIA

Legal Name: EPIDAURUS

Address: 2260 WATSON WAY City, State Zip: VISTA, CA 92083

Phone: (760) 599-1892 Fax: (760) 599-1884

Record ID: 370059AN

Service Type: RES Resident Capacity: 60 Total Occupancy: 68 Target Population: 1.2

Expiration Date: 12/31/2018 IMS: No

Program Name: TEEN RECOVERY CENTER-MONTECITO

Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 720 9TH STREET City, State Zip: RAMONA, CA 92065

Phone: (760) 744-3672 Fax: (760) 744-6182

Record ID: 370069AAN

Service Type: NON Target Population: 1.5

Expiration Date: 9/30/2019 IMS: No

Program Name: EAST COUNTY CENTER FOR CHANGE
Legal Name: MENTAL HEALTH SYSTEMS, INC.
Address: 545 NORTH MAGNOLIA AVENUE

Address: 545 NORTH MAGNOLIA AVENUE City, State Zip: EL CAJON, CA 92020-3608

Phone: (619) 579-0947 Fax: (619) 558-6282

Record ID: 370069BN

Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: NORTH COUNTY CENTER FOR CHANGE
Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 504 WEST VISTA WAY City, State Zip: VISTA, CA 92083

Phone: (760) 940-1836 Fax: (760) 940-1274

Record ID: 370069CN

Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: NORTH INLAND REGIONAL RECOVERY CENTER

Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 200 EAST WASHINGTON AVE., SUITE 100

City, State Zip: ESCONDIDO, CA 92025-1806

Phone: (760) 741-7708 Fax: (760) 741-5421

Record ID: 370069DN

Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: TEEN RECOVERY PROGRAM - NORTH INLAND

Legal Name: MENTAL HEALTH SYSTEMS, INC. 340 RANCHEROS DRIVE, SUITE 166 Address:

City, State Zip: SAN MARCOS, CA 92069

Phone: (760) 744-3672 Fax: (760) 744-6182

Record ID: 370069FN Service Type: NON

Target Population: 1.5

Expiration Date: 2/28/2019 IMS: No

Program Name: MID-COAST REGIONAL RECOVERY CENTER

Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 3340 KEMPER STREET, SUITES 105 AND 207

City, State Zip: SAN DIEGO, CA 92110

Phone: (619) 523-8121 Fax: (619) 523-8121

Record ID: 370069IN Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: HARMONY WOMEN'S RECOVERY CENTER

Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 3645 RUFFIN ROAD,

SUITE 100

SAN DIEGO, CA 92123-1875 City, State Zip:

(858) 384-6284 (858) 384-6453 Phone: Fax:

Record ID: 370069MN

Service Type: NON 1.3

Target Population:

Expiration Date: 1/31/2019 IMS: No

SOUTH COUNTY CENTER FOR CHANGE Program Name:

Legal Name: MENTAL HEALTH SYSTEMS, INC. Address: 1172 3RD AVENUE, SUITE D1

City, State Zip: CHULA VISTA, CA 91911

(858) 573-5144 Phone: (858) 573-2600 Fax:

Record ID: 370069QN

Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: FAMILY RECOVERY CENTER Legal Name: MENTAL HEALTH SYSTEMS, INC.

1100 SPORTFISHER DRIVE Address:

City, State Zip: OCEANSIDE, CA 92054

Phone: (858) 573-2600 Fax: (760) 439-4779

Record ID: 370069TN

RES Service Type: Resident Capacity: 55 Total Occupancy: 90 Target Population: 1.4

Expiration Date: 5/31/2018 IMS:

Program Name: ACTION CENTRAL

Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 6244 EL CAJON BOULEVARD, SUITES 15, 16, 17 &18

SAN DIEGO, CA 92115-3918 City, State Zip:

Phone: (619) 287-8225 (619) 287-4146 Fax:

Record ID: 370069XN

NON Service Type: Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No Program Name: SAN DIEGO CENTER FOR CHANGE

Legal Name: MENTAL HEALTH SYSTEMS, INC.

Address: 3340 KEMPER STREET, SUITE 101, 103 AND 104

City, State Zip: SAN DIEGO, CA 92110

Phone: (619) 758-1433 Fax: (619) 758-9823

Record ID: 370069YN
Service Type: NON

Service Type: NON
Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: UPAC, ADULT AND ADOLESCENT ALCOHOL AND DRUG TREATMENT PROGRAMS

Legal Name: UNION OF PAN ASIAN COMMUNITIES

Address: 3288 EL CAJON BOULEVARD, SUITES 1A, 1B, 3, 5, 6, 10, 11, 12, AND 13

City, State Zip: SAN DIEGO, CA 92104

Phone: (619) 521-5720 Fax: (619) 521-5728

Record ID: 370071AN
Service Type: NON
Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: DKA PARENTCARE FAMILY RECOVERY CENTER

Legal Name: VISTA HILL FOUNDATION
Address: 4990 WILLIAMS AVENUE
City, State Zip: LA MESA, CA 91942

Phone: (619) 698-1663 Fax: (619) 698-1665

Record ID: 370072AN
Service Type: NON

Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: PARENTCARE CENTRAL FAMILY RECOVERY CENTER

Legal Name: VISTA HILL FOUNDATION
Address: 4125 ALPHA STREET
SUITES E, F, AND G

City, State Zip: SAN DIEGO, CA 92113

Phone: (619) 266-0166 Fax: (619) 266-0155

Record ID: 370072CN Service Type: NON

Target Population: 1.3

Expiration Date: 8/31/2019 IMS: No

Program Name: VISTA HILL BRIDGES TEEN RECOVERY CENTER

Legal Name: VISTA HILL FOUNDATION

Address: 220 EUCLID AVENUE, SUITE 40 AND 50

City, State Zip: SAN DIEGO, CA 92114

Phone: (619) 795-7232 Fax: (916) 795-7265

Record ID: 370072DN

Service Type: NON Target Population: 1.5

Expiration Date: 9/30/2019 IMS: No

Program Name: CASA RAPHAEL

Legal Name: ALPHA PROJECT FOR THE HOMELESS

Address: 975 AND 993 POSTAL WAY

City, State Zip: VISTA, CA 92083

Phone: (760) 630-9922 Fax: (760) 630-9996

Record ID: 370073AN

Service Type: RES
Resident Capacity: 150
Total Occupancy: 150
Target Population: 1.2

Expiration Date: 6/30/2019 IMS: No

Program Name: UCSD CO-OCCURRING DISORDERS TREATMENT AND RECOVERY PROGRAM

Legal Name: UNIVERSITY OF CALIFORNIA, SAN DIEGO

140 ARBOR DRIVE Address: City, State Zip: SAN DIEGO, CA 92103

Phone: (619) 543-7795 Fax: (619) 543-7013

Record ID: 370077AN Service Type: NON

Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: SAN DIEGO RESCUE MISSION MEN'S CENTER RECOVERY PROGRAM

Legal Name: SAN DIEGO RESCUE MISSION, INC. Address: 120 ELM STREET, 3RD AND 4TH FLOOR

City, State Zip: SAN DIEGO, CA 92101

Phone: (619) 687-3720 Fax: (619) 704-2858

Record ID: 370080CN Service Type: RES Resident Capacity: 188 Total Occupancy: 188 Target Population: 1.2

Expiration Date: 1/31/2019 IMS: No

Program Name: NEW ENTRA CASA

Legal Name: NEW ENTRA CASA CORPORATION

Address: 3575 PERSHING AVENUE City, State Zip: SAN DIEGO, CA 92104

Phone: (619) 294-4526 Fax: (619) 294-4526

Record ID: 370083AN Service Type: RES

Resident Capacity: 6 Total Occupancy: 7 Target Population: 1.3

4/30/2018 TMS: Expiration Date: No

Program Name: NARCONON JLB RANCH Legal Name: NARCONON FRESH START

Address: 35955 HIGHWAY 79

City, State Zip: WARNER SPRINGS, CA 92086

Phone: (760) 782-0471 Fax: (760) 782-0695

Record ID: 370087BN Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 8 Target Population: 1.1

Expiration Date: 11/30/2018 TMS: No

NARCONON SUNSHINE SUMMIT LODGE Program Name:

Legal Name: NARCONON FRESH START Address: 35025 HIGHWAY 79

City, State Zip: WARNER SPRINGS, CA 92086

(760) 418-0030 Fax: (888) 680-2730 Phone:

Record ID: 370087CN Service Type: RES-DETOX

Resident Capacity: 30 Total Occupancy: 45 Target Population: 1.1

8/31/2018 Expiration Date: IMS: No

Program Name: ESCONDIDO COMMUNITY SOBERING SERVICES

Legal Name: INTERFAITH COMMUNITY SERVICES, INC. Address: 1717, 1719 EAST WASHINGTON AVENUE

City, State Zip: ESCONDIDO, CA 92027

(760) 520-8306 Phone: Fax: (760) 294-6056

Record ID: 370093BN

Service Type: RES Resident Capacity: 8 Total Occupancy: 8 Target Population: 1.1

Expiration Date: IMS: 7/31/2019 No Program Name: THE LIGHTHOUSE COMMUNITY
Legal Name: HEALTHCARE SERVICES, INC.
Address: 3880 ROSECRANS STREET
City, State Zip: SAN DIEGO, CA 92110

Phone: (619) 515-0243 Fax: (619) 235-0678

Record ID: 370094AP
Service Type: RES-DETOX

Resident Capacity: 98
Total Occupancy: 98
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: CALVARY RANCH CHRISTIAN DRUG AND ALCOHOL RECOVERY FACILITY

Legal Name: GOD'S HOUSE MINISTRIES, INCORPORATED

Address: 13610 WILLOW ROAD City, State Zip: LAKESIDE, CA 92040

Phone: (619) 561-2599 Fax: (619) 561-4673

Record ID: 370098AN Service Type: RES

Service Type: RES
Resident Capacity: 20
Total Occupancy: 20
Target Population: 1.2

Expiration Date: 5/31/2018 IMS: No

Program Name: LASTING RECOVERY

Legal Name: FARKAS & SAALINGER, PSYCHOLOGY CORP

Address: 6046 CORNERSTONE COURT WEST, SUITES 103, 104, 105, 107, 108, 110, 111, 112,

113, 114, 115, 127 & 128

City, State Zip: SAN DIEGO, CA 92121

Phone: (858) 453-4315 Fax: (858) 453-5690

Record ID: 370101AP
Service Type: NON
Target Population: 1.8

Expiration Date: 1/31/2019 IMS: No

Program Name: THE TRAINING CENTER

Legal Name: TRAINING CENTER EPHESIANS 4:11-16

Address: 525 GRAND AVENUE

City, State Zip: SPRING VALLEY, CA 91977

Phone: (619) 327-5400 Fax: (619) 327-5410

Record ID: 370104AN

Service Type: RES Resident Capacity: 56 Total Occupancy: 56 Target Population: 1.2

Expiration Date: 11/30/2017 IMS: No

Program Name:REJUVE-NATIONS OUTPATIENTS FACILITY, INC.Legal Name:REJUVE-NATIONS OUTPATIENTS FACILITY, INC.Address:4101 UNIVERSITY AVENUE, SUITES E204-E205

City, State Zip: SAN DIEGO, CA 92195

Phone: (619) 602-9405 Fax: (951) 657-7180

Record ID: 370105AN
Service Type: NON

Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: PALOMAR FAMILY COUNSELING SERVICE, INC. DRUG AND ALCOHOL PROGRAM

Legal Name: PALOMAR FAMILY COUNSELING SERVICE, INC.

Address: 1002 EAST GRAND AVENUE City, State Zip: ESCONDIDO, CA 92025

Phone: (760) 741-2660 Fax: (760) 741-2647

Record ID: 370107AN

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

CAPALINA CLINIC Program Name:

Legal Name: SAN DIEGO HEALTH ALLIANCE

Address: 1560 CAPALINA ROAD City, State Zip: SAN MARCOS, CA 92069

Phone: (760) 744-2104 Fax: (760) 744-1382

Record ID: 370108AP Service Type: NON-DETOX Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: FASHION VALLEY CLINIC Legal Name: SAN DIEGO HEALTH ALLIANCE Address: 7545 METROPOLITAN DRIVE City, State Zip: SAN DIEGO, CA 92108

Phone: (619) 718-9890 Fax: (619) 718-9897

Record ID: 370108CP Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

EL CAJON TREATMENT CENTER Program Name: Legal Name: SAN DIEGO HEALTH ALLIANCE Address: 234 N. MAGNOLIA AVE.

City, State Zip: EL CAJON, CA 92020 Phone: (619) 579-8378 Fax: (619) 579-8155

Record ID: 370108DP Service Type: NON-DETOX Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

THIRD AVENUE CLINIC Program Name:

SAN DIEGO TREATMENT SERVICES, LLC Legal Name:

Address: 1155 THIRD AVE.

City, State Zip: CHULA VISTA, CA 91911

Phone: (619) 498-8260 Fax: (619) 498-8265

Record ID: 370109AP Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 5/31/2019 TMS: No

ST. VINCENT DE PAUL VILLAGE RECOVERY SERVICES Program Name:

Legal Name: ST. VINCENT DE PAUL VILLAGE, INC.

Address: 16 15TH STREET, PAUL MIRABILE CENTER BUILDING, GROUP ROOM 200 & 207 AND THERAPY ROOM 233 &234

City, State Zip: SAN DIEGO, CA 92101

Phone: (619) 233-8500 Fax: (619) 231-9542

Record ID: 370110AN Service Type: NON

Target Population: 1.1

7/31/2018 Expiration Date: IMS: No

Program Name: SAN DIEGO TREATMENT AND RECOVERY CENTER

Legal Name: JC SERVICE AND ENTERPRISES, INC. Address: 6244 EL CAJON BOULEVARD, SUITE 26

City, State Zip: SAN DIEGO, CA 92115 Phone: (888) 547-6116

Record ID: 370111AP Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

SOLEDAD HOUSE Program Name:

ABC SOBER LIVING., LLC Legal Name: Address: 5330 SOLEDAD MOUNTAIN ROAD

City, State Zip: SAN DIEGO, CA 92109

Phone: (858) 204-1304 Fax: (858) 274-8700

Record ID: 370116AP Service Type: RES

Resident Capacity: 6 Total Occupancy: 7 Target Population: 1.3

Expiration Date: 5/31/2019 IMS: No

SOLEDAD HOUSE II Program Name:

Legal Name: ABC SOBER LIVING., LLC 5214 SOLEDAD MOUNTAIN ROAD Address:

City, State Zip: SAN DIEGO, CA 92109

Phone: (858) 204-1304 Fax: (858) 274-8700

Record ID: 370116BP Service Type: RES Resident Capacity: 6 Total Occupancy: 7 Target Population: 1.3

Expiration Date: 8/31/2019 IMS: No

Program Name: SAN DIEGO AMERICAN INDIAN HEALTH CENTER Legal Name: SAN DIEGO AMERICAN INDIAN HEALTH CENTER

Address: 2602 FIRST AVENUE, SUITE 100

City, State Zip: SAN DIEGO, CA 92103

(619) 234-2158 Ext:102 (619) 234-0505 Phone: Fax:

Record ID: 370120AN Service Type: NON Target Population: 1.5

Expiration Date: 4/30/2019 IMS: No

Program Name: ATON CENTER

Legal Name: ATON CENTER, INC.

Address: 3250 COUNTRY ROSE CIRCLE

City, State Zip: ENCINITAS, CA 92024

Phone: (858) 759-5017 Fax: (858) 756-1686

Record ID: 370122AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 7 Target Population: 1.1

11/30/2018 IMS: Expiration Date: Yes

Program Name: ATON CENTER

Legal Name: ATON CENTER, INC.

Address: 3238 COUNTRY ROSE CIRCLE

City, State Zip: ENCINITAS, CA 92024

Phone: (858) 759-5017 (858) 759-5016 Fax:

Record ID: 370122CP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 8 Target Population: 1.1

Expiration Date: 3/31/2018 TMS: No

Program Name: ATON CENTER

Legal Name: ATON CENTER, INC.

Address: 3462 WESTERN SPRINGS ROAD

City, State Zip: ENCINITAS, CA 92024

(858) 759-5017 Fax: (858) 759-5016 Phone:

Record ID: 370122DP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

12/31/2017 IMS: Expiration Date: No

Program Name: ATON CENTER

Legal Name: ATON CENTER, INC.

Address: 3262 COUNTRY ROSE CIRCLE City, State Zip:

ENCINITAS, CA 92024

Phone: (858) 759-5017 Fax: (858) 759-5016

Record ID: 370122EP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

IMS: Expiration Date: 4/30/2018 No Program Name: ATON CENTER Legal Name: ATON CENTER, INC.

Address: 3225 COUNTRY ROSE CIRCLE City, State Zip: ENCINITAS, CA 92024

Phone: (858) 759-5017 Fax: (858) 759-5016

Record ID: 370122FP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: Yes

Program Name: SAN DIEGO ADDICTION TREATMENT CENTER, INC. Legal Name: SAN DIEGO ADDICTION TREATMENT CENTER, INC.

Address: 2456 E STREET City, State Zip: SAN DIEGO, CA 92102

Phone: (619) 507-6510 Fax: (619) 269-9056

Record ID: 370129AP
Service Type: RES-DETOX

Resident Capacity: 36
Total Occupancy: 36
Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: NEW HORIZON RECOVERY

Legal Name: MARTINA COFFELT
Address: 417 SANDALWOOD COURT
City, State Zip: ENCINITAS, CA 92024

Phone: (760) 805-4015 Fax: (760) 529-4403

Record ID: 370130AP
Service Type: RES

Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: WEST COAST RECOVERY CENTERS

Legal Name: WEST COAST MEN'S, LLC
Address: 785 GRAND AVENUE

SUITES 214, 216, & 220 City, State Zip: CARLSBAD, CA 92008

Phone: (442) 500-8236 Fax: (442) 500-8479

Record ID: 370135BP Service Type: NON

Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name:PACIFIC BAY RECOVERYLegal Name:PACIFIC BAY RECOVERY INC

Address: 1501 5TH AVENUE, SUITE 100,101 AND 201

City, State Zip: SAN DIEGO, CA 92101

Phone: (619) 456-0811 Fax: (619) 456-0832

Record ID: 370136AP
Service Type: NON

Target Population: 1.8

Expiration Date: 5/31/2018 IMS: No

Program Name: PACIFIC BAY RECOVERY
Legal Name: PACIFIC BAY RECOVERY INC
Address: 4095 JACKDAW STREET
City, State Zip: SAN DIEGO, CA 92103

Phone: (619) 542-9956 Fax: (619) 456-0832

Record ID: 370136CP Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: TRUE LIFE CENTER FOR WELLBEING, INC.
Legal Name: TRUE LIFE CENTER FOR WELLBEING, INC.

Address: 4520 EXECUTIVE DRIVE, SUITE 225

City, State Zip: SAN DIEGO, CA 92121 Phone: (858) 349-4116

Record ID: 370137AP
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: APEX RECOVERY
Legal Name: APEX RECOVERY, LLC
Address: 4251 NABAL DRIVE
City, State Zip: LA MESA, CA 91941

Phone: (619) 756-6424 Fax: (619) 243-7211

Record ID: 370138AP
Service Type: RES

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name:APEXRECOVERYLegal Name:APEXRECOVERY, LLCAddress:9952GRANDVIEWDRIVECity, State Zip:LA MESA, CA 91941

Phone: (619) 741-8046 Fax: (619) 243-7211

Record ID: 370138BP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: GENESIS RECOVERY, INC. Legal Name: GENESIS RECOVERY, INC.

Address: 24352 FEATHERSTONE CANYON ROAD

City, State Zip: LAKESIDE, CA 92040

Phone: (619) 797-7319 Fax: (619) 367-9737

Record ID: 370139AN
Service Type: RES
Resident Capacity: 24
Total Occupancy: 31
Target Population: 1.2

Expiration Date: 9/30/2018 IMS: No

Program Name: GENESIS RECOVERY, INC. DAY PROGRAM

Legal Name: GENESIS RECOVERY, INC.

Address: 7373 UNIVERSITY AVE, SUITE 110

City, State Zip: LA MESA, CA 91942

Phone: (619) 797-7319 Fax: (619) 367-9737

Record ID: 370139BN Service Type: NON

Target Population: 1.2

Expiration Date: 3/31/2019 IMS: No

Program Name: CONFIDENTIAL RECOVERY

Legal Name: COMMUNITY BEHAVIORAL HEALTH SOLUTIONS, INC.

Address: 7071 CONSOLIDATED WAY City, State Zip: SAN DIEGO, CA 92121 Phone: (858) 449-3898

Record ID: 370140AP
Service Type: NON
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: PRACTICAL RECOVERY IOP

Legal Name: PRACTICAL RECOVERY PSYCHOLOGY GROUP, INC. Address: 8950 VILLA LA JOLLA DRIVE, SUITE B214

City, State Zip: LA JOLLA, CA 92037-1708

Phone: (858) 546-1100 Fax: (858) 455-0141

Record ID: 370141AP
Service Type: NON
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: SOLUTIONS FOR RECOVERY

Legal Name: FAMILY HEALTH CENTERS OF SAN DIEGO, INC.

Address: 2136 EL CAJON BOULEVARD City, State Zip: SAN DIEGO, CA 92104

Phone: (619) 515-2588 Fax: (619) 269-8349

Record ID: 370142AN Service Type: NON

Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: SOUTHERN CALIFORNIA RECOVERY CENTER - ENCINITAS

Legal Name: DR RECOVERY ENCINITAS, LLC
Address: 609 S. VULCAN AVENUE, SUITE 301

City, State Zip: ENCINITAS, CA 92024

Phone: (800) 410-6552 Fax: (949) 542-3878

Record ID: 370143AP
Service Type: NON
Target Population: 1.2

Expiration Date: 9/30/2018 IMS: No

Program Name: RECOVERY WORKS SAN DIEGO

Legal Name: CLARK E. SMITH, M.D., A MEDICAL CORPORATION

Address: 9820 WILLOW CREEK ROAD, #295

City, State Zip: SAN DIEGO, CA 92131
Phone: (858) 530-9112

Record ID: 370144AP
Service Type: NON
Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: FOUNDATIONS OF SAN DIEGO
Legal Name: FOUNDATIONS SAN DIEGO, LLC
Address: 3930 FOURTH AVENUE, SUITE 301

City, State Zip: SAN DIEGO, CA 92103

Phone: (619) 849-6011 Fax: (619) 230-5554

Record ID: 370146AP Service Type: NON

Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: SHERIDAN GARDENS

Legal Name: SIERRA ASSET MANAGEMENT, LLC

Address: 2021 SHERIDAN ROAD City, State Zip: ENCINITAS, CA 92024

Phone: (706) 230-1176 Fax: (949) 660-0632

Record ID: 370147AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name:PRESENT MOMENTS RECOVERYLegal Name:WINDRIVER RECOVERY, LLCAddress:1809 WINDRIVER STREET

City, State Zip: SAN MARCOS, CA 92078

Phone: (619) 363-4767 Fax: (619) 655-4732

Record ID: 370148AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 7
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: PACIFIC TREATMENT SERVICES

Legal Name: W. WOOTON, INC.

Address: 333 SOUTH JUNIPER STREET, SUITE 114

City, State Zip: ESCONDIDO, CA 92025 Phone: (858) 610-0438

Record ID: 370150AP
Service Type: NON
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: CROWNVIEW CO-OCCURRING INSTITUTE INCORPORATED
Legal Name: CROWNVIEW CO-OCCURRING INSTITUTE, INCORPORATED

Address: 2892 JEFFERSON STREET City, State Zip: CARLSBAD, CA 92008

Phone: (760) 434-9500 Fax: (760) 434-3550

Record ID: 370151AP
Service Type: NON
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: AFFINITY TREATMENT CENTERS

Legal Name: CAMELOT AT AFFINITY TREATMENT CENTERS, INC.

Address: 2035 ALTA VISTA DRIVE

City, State Zip: VISTA, CA 92084

Phone: (760) 917-1112 Fax: (760) 414-9127

Record ID: 370152AP
Service Type: RES
Resident Capacity: 5
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: OCEAN RANCH RECOVERY

Legal Name: SOCAL DETOX LLC

Address: 20555 FORTUNA DEL SUR City, State Zip: ELFIN FOREST, CA 92029

Phone: (760) 510-3161 Fax: (760) 510-3168

Record ID: 370153AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 11/30/2019 IMS: No

Program Name: VILLA KALI MA
Legal Name: KALI WEST LLC
Address: 2912 MANAGUA PLACE
City, State Zip: CARLSBAD, CA 92009

Phone: (619) 246-8862 Fax: (760) 683-5157

Record ID: 370154AP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 7/31/2018 IMS: No

Program Name: SOBER COLLEGE SAN DIEGO

Legal Name: SAN DIEGO STUDENT RECOVERY, LLC Address: 5440 MOREHOUSE DRIVE, #4500

City, State Zip: SAN DIEGO, CA 92121

Phone: (310) 363-2415 Fax: (858) 750-3205

Record ID: 370155AP

Service Type: NON
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: DIEGO PALMS RECOVERY

Legal Name: DIEGO PALMS RECOVERY, INC. Address: 700 GARDEN VIEW COURT,

SUITE 202

City, State Zip: ENCINITAS, CA 92024 Phone: (760) 479-6163

Record ID: 370156AP
Service Type: NON
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: TRUE NORTH RECOVERY SERVICES
Legal Name: TRUE NORTH BEHAVIORAL, APC
Address: 543 ENCINITAS BOULEVARD,

SUITE 109

City, State Zip: ENCINITAS, CA 92024

Phone: (760) 517-6544 Fax: (888) 850-3284

Record ID: 370157AP
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: SOUTHERN CALIFORNIA RECOVERY CENTERS

Legal Name: SOUTHERN CALIFORNIA RECOVERY CENTERS OCEANSIDE, LLC

Address: 2850 PIO PICO DRIVE, SUITES A, B, C, & D

City, State Zip: CARLSBAD, CA 92008

Phone: (949) 542-3879 Fax: (760) 607-3038

Record ID: 370158AP Service Type: NON

Target Population: 1.2

Expiration Date: 8/31/2018 IMS: No

Program Name: LA JOLLA RECOVERY

Legal Name: LA JOLLA RECOVERY, INC. Address: 7301 GIRARD AVENUE, SUITE LL

City, State Zip: LA JOLLA, CA 92037 Phone: (858) 345-7926

Record ID: 370159AP
Service Type: NON
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: PACIFIC PALMS RECOVERY
Legal Name: PACIFIC PALMS RECOVERY, LLC

Address: 2215 MESA DRIVE City, State Zip: OCEANSIDE, CA 92054

Phone: (949) 228-4207 Fax: (949) 234-9634

Record ID: 370160AP

Service Type: NON
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: BLVD CENTERS, INC.
Legal Name: BLVD CENTERS INC.
Address: 3785 6TH AVENUE,

200

City, State Zip: SAN DIEGO, CA 92103

Phone: (619) 541-6084 Fax: (619) 615-2053

Record ID: 370161AP
Service Type: NON

Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: PARAGON RECOVERY

Legal Name: PARAGON RECOVERY, LLC.
Address: 1852 SANTA MARGARITA DRIVE

City, State Zip: FALLBROOK, CA 92028 Phone: (760) 731-1386

Record ID: 370163AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: TALK THERAPY PSYCHOLOGY CENTER

Legal Name: TALK THERAPY PSYCHOLOGY CENTER, CORP.

Address: 5935 CORNERSTONE COURT WEST

SUITE 125

City, State Zip: SAN DIEGO, CA 92121 Phone: (858) 205-2490

Record ID: 370164AP
Service Type: NON
Target Population: 1.8

Expiration Date: 10/31/2018 IMS: No

Program Name: LA JOLLA ADDICTION HEALING CENTER
Legal Name: LA JOLLA ADDICTION HEALING CENTER

Address: 7590 FAY AVENUE, SUITE 404

City, State Zip: LA JOLLA, CA 92037 Phone: (858) 454-4357

Record ID: 370165AP
Service Type: NON

Target Population: 1.7

Expiration Date: 12/31/2018 IMS: No

Program Name: FUTURES TREATING ADDICTIONS

Legal Name: FUTURES RECOVERY, INC. Address: 1405 MISSOURI AVENUE City, State Zip: OCEANSIDE, CA 92054

Phone: (800) 944-6441 Fax: (800) 944-6441

Record ID: 370166AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name:BETTY FORD CENTER - SAN DIEGOLegal Name:HAZELDEN BETTY FORD FOUNDATIONAddress:11720 EL CAMINO REAL, SUITE 200

City, State Zip: SAN DIEGO, CA 92130

Phone: (858) 766-9980 Fax: (858) 259-0197

Record ID: 370167AN Service Type: NON

Target Population: 1.7

Expiration Date: 5/31/2019 IMS: No

Program Name: CALIFORNIA VISTAS ADDICTION TREATMENT
Legal Name: CALIFORNIA ADDICTION TREATMENT CENTER LLC

Address: 3875 PEONY DRIVE City, State Zip: FALLBROOK, CA 92028

Phone: (951) 764-3950 Fax: (909) 245-1090

Record ID: 370168AP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: Yes

Program Name: IMMERSIVE RECOVERY

Legal Name: CALIFORNIA COASTAL RECOVERY CENTERS, LLC

1582 W. SAN MARCOS BLVD, SUITE 301 Address:

City, State Zip: SAN MARCOS, CA 92069

(858) 342-9151 Phone: Record ID: 370169AP

Service Type: NON Target Population: 1.7

Expiration Date: 4/30/2019 IMS: No

RESTORE DETOX CENTERS Program Name:

Legal Name: RESTORE TREATMENT CENTERS, LLC

Address: 14099 SKY MOUNTAIN TRAIL

City, State Zip: POWAY, CA 92064

(949) 813-6151 Fax: (760) 216-6760 Phone:

Record ID: 370171AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: Yes

Program Name: PALMS DETOX

Legal Name: PALMS DETOX

Address: 5455 CONNECTICUT AVE City, State Zip: SAN DIEGO, CA 91942 Phone: (786) 709-7912

Record ID: 370173AP Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: SHORELINE RANCH

Legal Name: PURE LIFE RECOVERY, LLC. Address: 19915 FORTUNA DEL ESTE City, State Zip: ESCONDIDO, CA 92029

Phone: (949) 346-2486 Fax: (949) 545-6267

Record ID: 370174AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

IMS: Expiration Date: 6/30/2018 Nο

BOLD HEALTH Program Name:

Legal Name: BOLD HEALTH MEDICAL GROUP, A PROFESSIONAL CORPORATION

Address: 561 SAXONY PLACE, SUITE 101 City, State Zip: ENCINITAS, CA 92024

Phone: (760) 503-4703 Fax: (866) 361-2653

Record ID: 370177AP Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

State of California, Department of Health Care Services Licensed Residential Facilities and/or Certified Alcohol and Drug Programs

As of 11/1/2017

San Francisco County

Program Name: ACCEPTANCE PLACE Legal Name: BAKER PLACES, INC. Address: 1326 4TH AVENUE

City, State Zip: SAN FRANCISCO, CA 94122

Phone: (415) 682-2080 Fax: (415) 626-2398

Record ID: 380001BN

Service Type: RES Resident Capacity: 10 Total Occupancy: 10 Target Population: 1.2

Expiration Date: 1/31/2018 IMS: No

Program Name: FERGUSON PLACE Legal Name: BAKER PLACES, INC. Address: 1249 SCOTT STREET

City, State Zip: SAN FRANCISCO, CA 94115

(415) 922-1427 Phone: (415) 922-9104 Fax:

Record ID: 380001CN

Service Type: RES Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

1/31/2019 IMS: Expiration Date: No

JOE HEALY DETOXIFICATION PROGRAM

BAKER PLACES, INC.

Legal Name: Address: 101 GOUGH/120 PAGE STREET, 2ND AND 3RD FLOOR

City, State Zip: SAN FRANCISCO, CA 94102

Phone: (415) 553-4490

Record ID: 380001IN Service Type: RES-DETOX

Resident Capacity: 31 Total Occupancy: 31 Target Population: 1.1

Expiration Date: 9/30/2018 IMS:

Program Name: ARA FIRST STEP HOME

Legal Name: ALCOHOLICS REHABILITATION ASSOCIATION OF SAN FRANCISCO, INC.

Address: 1035 HAIGHT STREET City, State Zip: SAN FRANCISCO, CA 94117

(415) 863-3661 (415) 863-3670 Phone: Fax:

Record ID: 380003AN

Service Type: RES Resident Capacity: 45 Total Occupancy: 45 Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: FRIENDSHIP HOUSE

Legal Name: THE FRIENDSHIP HOUSE ASSOCIATION OF AMERICAN INDIANS Address: 56 JULIAN AVENUE, 1ST, 2ND AND 3RD AND 4TH FLOORS

City, State Zip: SAN FRANCISCO, CA 94103

(415) 865-0964 Phone: (415) 865-5428 Fax:

Record ID: 380004AN

Service Type: RES Resident Capacity: 80 Total Occupancy: 80 Target Population: 1.1

10/31/2017 TMS: Expiration Date:

Program Name: GOLDEN GATE FOR SENIORS

Legal Name: COMMUNITY AWARENESS & TREATMENT SERVICES, INC.

Address: 637 SOUTH VAN NESS AVENUE City, State Zip: SAN FRANCISCO, CA 94110

Phone: (415) 626-7553
Record ID: 380005AN

Record ID: 3800
Service Type: RES
Resident Capacity: 19
Total Occupancy: 20
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: HARBOR LIGHT ALCOHOL SERVICES CENTER

Legal Name: THE SALVATION ARMY
Address: 1275 HARRISON STREET
City, State Zip: SAN FRANCISCO, CA 94103

Phone: (415) 503-3000 Fax: (415) 864-5974

Record ID: 380006AN
Service Type: RES-DETOX
Resident Capacity: 118

Total Occupancy: 118
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: THE SALVATION ARMY - HARBOR HOUSE

Legal Name: THE SALVATION ARMY Address: 407 NINTH STREET

City, State Zip: SAN FRANCISCO, CA 94103

Phone: (415) 503-3000 Fax: (415) 252-6159

Record ID: 380006EN

Service Type: RES
Resident Capacity: 30
Total Occupancy: 82
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: LATINO FAMILY ALCOHOLISM COUNSELING CENTER

Legal Name: THE MISSION COUNCIL ON ALCOHOL ABUSE FOR THE SPANISH SPEAKING

Address: 154-A CAPP STREET

City, State Zip: SAN FRANCISCO, CA 94110

Phone: (415) 826-6767 Fax: (415) 826-6774

Record ID: 380008AN

Service Type: NON

Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: FAMILY DAY TREATMENT PROGRAM

Legal Name: THE MISSION COUNCIL ON ALCOHOL ABUSE FOR THE SPANISH SPEAKING

No

Address: 154-A CAPP STREET

City, State Zip: SAN FRANCISCO, CA 94110

Phone: (415) 826-0554 Fax: (415) 701-1868

Record ID: 380008BN

Service Type: NON Target Population: 1.7

Expiration Date: 1/31/2019 IMS:

Program Name: HENRY OHLHOFF HOUSE
Legal Name: HENRY OHLHOFF HOUSE

Address: 601 AND 625 STEINER STREET City, State Zip: SAN FRANCISCO, CA 94117

Phone: (415) 621-4388 Fax: (415) 626-0170

Record ID: 380013AN

Service Type: RES
Resident Capacity: 52
Total Occupancy: 52
Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: HENRY OHLHOFF OUTPATIENT PROGRAMS

Legal Name: HENRY OHLHOFF HOUSE

Address: 2191 MARKET STREET, SUITE A City, State Zip: SAN FRANCISCO, CA 94114

Phone: (415) 575-1100 Fax: (415) 575-1106

Record ID: 380013BN
Service Type: NON
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: HEALTHRIGHT 360
Legal Name: HEALTHRIGHT 360
Address: 1735 MISSION STREET
City, State Zip: SAN FRANCISCO, CA 94103

Phone: (415) 970-7500 Fax: (415) 746-1968

Record ID: 380016ACN

Service Type: NON Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: HEALTHRIGHT 360 Legal Name: HEALTHRIGHT 360

Address: 1318 GATEVIEW STREET, TREASURE ISLAND UNITS A-F;

1442 CHINOOK COURT, UNIT D

City, State Zip: SAN FRANCISCO, CA 94130

Phone: (415) 970-7500 Fax: (415) 865-0119

Record ID: 380016ADN
Service Type: RES-DETOX
Resident Capacity: 57
Total Occupancy: 57

Total Occupancy: 57
Target Population: 1.4

Expiration Date: 7/31/2018 IMS: No

Program Name: HEALTHRIGHT 360
Legal Name: HEALTHRIGHT 360
Address: 890 HAYES STREET

City, State Zip: SAN FRANCISCO, CA 94117

Phone: (415) 970-7500 Record ID: 380016AFN

Service Type: RES
Resident Capacity: 115
Total Occupancy: 115
Target Population: 1.2

Expiration Date: 4/30/2018 IMS: No

Program Name:HEALTHRIGHT 360Legal Name:HEALTHRIGHT 360Address:214 HAIGHT STREET

City, State Zip: SAN FRANCISCO, CA 94102

Phone: (415) 762-3700 Fax: (415) 989-4910

Record ID: 380016AHN

Service Type: RES
Resident Capacity: 64
Total Occupancy: 64
Target Population: 1.3

Expiration Date: 3/31/2019 IMS: No

Program Name: HEALTHRIGHT 360
Legal Name: HEALTHRIGHT 360
Address: 1601 DONNER AVENUE

Address: 1601 DONNER AVENUE #3 City, State Zip: SAN FRANCISCO, CA 94124

Phone: (415) 970-7500 Fax: (415) 865-0119

Record ID: 380016AJN

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: HEALTHRIGHT 360 Legal Name: HEALTHRIGHT 360

Address: 2261 AND 2263 BRYANT STREET City, State Zip: SAN FRANCISCO, CA 94110

Phone: (415) 970-7500 Fax: (415) 000-0000

Record ID: 380016AKN

Service Type: RES Resident Capacity: 16 Total Occupancy: 25 Target Population: 1.4

Expiration Date: 7/31/2019 IMS: No

Program Name: HEALTHRIGHT 360
Legal Name: HEALTHRIGHT 360
Address: 815 BUENA VISTA WEST
City, State Zip: SAN FRANCISCO, CA 94117

Phone: (415) 970-7500 Fax: (415) 437-6823

Record ID: 380016ALN
Service Type: RES-DETOX

Resident Capacity: 108 Total Occupancy: 108 Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: YOUTH SERVICES OF SAN FRANCISCO

Legal Name: HEALTHRIGHT 360

Address: 2166 HAYES STREET, SUITE 302

City, State Zip: SAN FRANCISCO, CA 94117

Phone: (415) 776-1001 Fax: (415) 776-1066

Record ID: 380016ANN

Service Type: NON Target Population: 1.5

Expiration Date: 1/31/2018 IMS: No

Program Name: ASIAN AMERICAN RESIDENTIAL RECOVERY SERVICES

Legal Name: HEALTHRIGHT 360 Address: 2024 HAYES STREET

City, State Zip: SAN FRANCISCO, CA 94117

Phone: (415) 750-5111
Record ID: 380016AON

Service Type: RES
Resident Capacity: 26
Total Occupancy: 26
Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: AARS-PROJECT ADAPT
Legal Name: HEALTHRIGHT 360
Address: 2020 HAYES STREET

City, State Zip: SAN FRANCISCO, CA 94117

Phone: (415) 750-5125
Record ID: 380016AQN

Service Type: NON

Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: LEE WOODWARD COUNSELING CENTER FOR WOMEN

Legal Name: HEALTHRIGHT 360

Address: 2166 HAYES STREET, SUITE 303 & 303-A

City, State Zip: SAN FRANCISCO, CA 94117

Phone: (415) 776-1001 Fax: (415) 776-1066

Record ID: 380016ARN

Service Type: NON Target Population: 1.3

Expiration Date: 6/30/2018 IMS: No

Program Name: HEALTHRIGHT 360 - OUTPATIENT PROGRAM

Legal Name: HEALTHRIGHT 360
Address: 1563 MISSION STREET
1ST AND 3RD FLOORS

City, State Zip: SAN FRANCISCO, CA 94103

Phone: (415) 762-3700 Ext:301 Fax: (415) 865-0119

Record ID: 380016ASN

Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: FATHER ALFRED CENTER
Legal Name: ST. ANTHONY FOUNDATION

Address: 291 10TH STREET

City, State Zip: SAN FRANCISCO, CA 94103

Phone: (415) 592-2880 Fax: (415) 252-0537

Record ID: 380017CN
Service Type: RES
Resident Capacity: 80
Total Occupancy: 80
Target Population: 1.2

Expiration Date: 3/31/2018 IMS: No

Program Name: STEPPING STONE

Legal Name: SAN FRANCISCO WOMEN'S REHABILITATION FOUNDATION, INCORPORATED

Address: 255 10TH AVENUE

City, State Zip: SAN FRANCISCO, CA 94118

Phone: (415) 751-5921 Fax: (415) 751-5130

Record ID: 380032AN

Service Type: RES Resident Capacity: 14 Total Occupancy: 14 Target Population: 1.3

Expiration Date: 8/31/2018 IMS: No

Program Name: GOOD SHEPHERD GRACENTER

Legal Name: THE GOOD SHEPHERD GRACENTER OF SAN FRANCISCO

Address: 250 AMHERST STREET City, State Zip: SAN FRANCISCO, CA 94134

Phone: (415) 337-1938 Fax: (415) 586-0355

Record ID: 380040BN

Service Type: RES Resident Capacity: 13 Total Occupancy: 13 Target Population: 1.3

Expiration Date: 6/30/2018 IMS: No

Program Name: JELANI HOUSE Legal Name: JELANI, INC.

Address: 1601 QUESADA AVENUE
City, State Zip: SAN FRANCISCO, CA 94124

Phone: (415) 822-5977 Fax: (415) 822-5943

Record ID: 380045AN

Service Type: RES
Resident Capacity: 16
Total Occupancy: 42
Target Population: 1.3

Expiration Date: 6/30/2018 IMS: No

Program Name: JELANI, INC.'S FAMILY PROGRAM

Legal Name: JELANI, INC.

Address: 1638 AND 1640 KIRKWOOD STREET

City, State Zip: SAN FRANCISCO, CA 94124

Phone: (415) 671-1165 Fax: (415) 671-1043

Record ID: 380045DN

Service Type: RES Resident Capacity: 12 Total Occupancy: 24 Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: CASA QUETZAL RECOVERY HOME

Legal Name: LATINO COMMISSION ON ALCOHOL AND

DRUG ABUSE SERVICES OF SAN MATEO COUNTY, INC.

Address: 635 BRUNSWICK STREET City, State Zip: SAN FRANCISCO, CA 94112

Phone: (415) 337-4065

Record ID: 380055AN
Service Type: RES
Resident Capacity: 9
Total Occupancy: 9
Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: AVIVA HOUSE

Legal Name: LATINO COMMISSION ON ALCOHOL AND

DRUG ABUSE SERVICES OF SAN MATEO COUNTY, INC.

Address: 1724-1726 BRYANT STREET City, State Zip: SAN FRANCISCO, CA 94110

Phone: (415) 558-9125 Fax: (650) 244-1447

Record ID: 380055BN Service Type: RES

Resident Capacity: 6
Total Occupancy: 9
Target Population: 1.3

Expiration Date: 3/31/2018 IMS: No

Program Name: HORIZONS UNLIMITED OF SAN FRANCISCO, INC. Legal Name: HORIZONS UNLIMITED OF SAN FRANCISCO, INC.

Address: 440 POTRERO AVENUE

City, State Zip: SAN FRANCISCO, CA 94110

Phone: (415) 487-6700 Fax: (415) 487-6724

Record ID: 380059AN
Service Type: NON
Target Population: 1.5

Expiration Date: 2/28/2019 IMS: No

Program Name: STIMULANT TREATMENT OUTPATIENT PROGRAM (STOP)

Legal Name: UNIVERISTY OF CALIFORNIA, SAN FRANCISCO

Address: 982 MISSION STREET City, State Zip: SAN FRANCISCO, CA 94103

Phone: (415) 597-8038 Fax: (415) 597-8004

Record ID: 380061AN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: EPIPHANY HOUSE

Legal Name: MOUNT ST. JOSEPH - ST. ELIZABETH

Address: 1615 BRODERICK STREET City, State Zip: SAN FRANCISCO, CA 94115

Phone: (415) 409-6003 Fax: (415) 351-4051

Record ID: 380081BN

Service Type: RES
Resident Capacity: 14
Total Occupancy: 22
Target Population: 1.4

Expiration Date: 11/30/2017 IMS: No

Program Name: EPIPHANY RESIDENTIAL PROGRAM

Legal Name: MOUNT ST. JOSEPH - ST. ELIZABETH

Address: 100 MASONIC AVENUE City, State Zip: SAN FRANCISCO, CA 94118

Phone: (415) 567-8370 Fax: (415) 292-5531

Record ID: 380081CN

Service Type: RES
Resident Capacity: 14
Total Occupancy: 26
Target Population: 1.4

Expiration Date: 11/30/2017 IMS: No

HARM REDUCTION THERAPY CENTER Program Name: Legal Name: THE HARM REDUCTION THERAPY CENTER 45 FRANKLIN STREET, SUITE 320 Address:

City, State Zip: SAN FRANCISCO, CA 94102

Phone: (415) 252-0669 Fax: (510) 251-1139

Record ID: 380082AN Service Type: NON Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: POST RELEASE EDUCATION PROGRAM (P.R.E.P.)

SAN FRANCISCO SHERIFF'S DEPARTMENT Legal Name:

Address: 70 OAK GROVE

City, State Zip: SAN FRANCISCO, CA 94107

Phone: (415) 575-6450 Fax: (415) 575-6452

Record ID: 380083BN NON Service Type: Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

SUBSTANCE ABUSE PROGRAM Program Name:

Legal Name: CURRY SENIOR CENTER Address: 315 TURK STREET

City, State Zip: SAN FRANCISCO, CA 94102

Phone: (415) 885-2274 Fax: (415) 885-2344

Record ID: 380091AN

Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

NATIVE AMERICAN HEALTH CENTER Program Name:

Legal Name: NATIVE AMERICAN HEALTH CENTER, INC.

Address: 160 CAPP STREET, 2ND FLOOR City, State Zip: SAN FRANCISCO, CA 94110

Phone: (415) 503-1046 Fax: (415) 503-7081

Record ID: 380094AN

Service Type: NON Target Population: 1.5

5/31/2018 Expiration Date: TMS: Nο

Program Name: THE STONEWALL PROJECT

Legal Name: THE SAN FRANCISCO ALDS 101 1035 MARKET STREET, SUITE 400 THE SAN FRANCISCO AIDS FOUNDATION Address:

City, State Zip: SAN FRANCISCO, CA 94103

Phone: (415) 487-3100 Fax: (415) 558-9657

Record ID: 380096AN

Service Type: NON Target Population: 1.2

Expiration Date: 3/31/2018 IMS: No

ASIAN AND PACIFIC ISLANDER WELLNESS CENTER, INC. Program Name:

Legal Name: ASIAN AND PACIFIC ISLANDER WELLNESS CENTER, INC.

730 POLK STREET, 4TH FLOOR Address: City, State Zip: SAN FRANCISCO, CA 94109

(415) 292-3400 (415) 292-3404 Phone: Fax:

Record ID: 380098AN

Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

BAYVIEW HUNTERS POINT FOUNDATION YOUTH SERVICES PROGRAM Program Name:

BAYVIEW HUNTERS POINT FOUNDATION FOR COMMUNITY IMPROVEMENT Legal Name:

Address: 5015 THIRD STREET

City, State Zip: SAN FRANCISCO, CA 94124

(415) 822-1585 (415) 822-6443 Phone: Fax:

Record ID: 380101DN Service Type: NON

Target Population: 1.5

Expiration Date: 11/30/2018 TMS: Nο

BAYSIDE SAN FRANCISCO Program Name: Legal Name: BAYSIDE MARIN, INC.

Address: 450 SUTTER STREET, SUITE 300 City, State Zip: SAN FRANCISCO, CA 94108

(415) 721-2000 Phone:

Record ID: 380102AP NON Service Type: Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

FOUNDATIONS SAN FRANCISCO Program Name:

Legal Name: FRN OUTPATIENT SAN FRANCISCO LLC Address: 55 FRANCISCO STREET, SUITE 405

City, State Zip: SAN FRANCISCO, CA 94133

(415) 293-1370 Fax: (415) 923-8899 Phone:

Record ID: 380104AP

Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

UCSF ALLIANCE HEALTH PROJECT Program Name:

Legal Name: THE REGENTS OF THE UNIVERSITY OF CALIFORNIA

Address: 1930 MARKET STREET

City, State Zip: SAN FRANCISCO, CA 94102

Phone: (415) 476-3902 Fax: (415) 476-3655

Record ID: 380105AN

Service Type: NON

Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

State of California, Department of Health Care Services Licensed Residential Facilities and/or Certified Alcohol and Drug Programs

As of 11/1/2017

San Joaquin County

Program Name: RECOVERY HOUSE

Legal Name: SAN JOAQUIN COUNTY BEHAVIORAL HEALTH SERVICES

Address: 500 WEST HOSPITAL ROAD City, State Zip: FRENCH CAMP, CA 95231

Phone: (209) 468-6857 Fax: (209) 468-6739

Record ID: 390002AN
Service Type: RES-DETOX

Resident Capacity: 69 Total Occupancy: 69 Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: CHEMICAL DEPENDENCY COUNSELING CENTER

Legal Name: SAN JOAQUIN COUNTY BEHAVIORAL HEALTH SERVICES

Address: 620 NORTH AURORA STREET SUITES 1, 3, 3A, AND S2-9

City, State Zip: STOCKTON, CA 95202

Phone: (209) 468-3720 Fax: (209) 468-8640

Record ID: 390002DN

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: FAMILY TIES

Legal Name: SAN JOAQUIN COUNTY BEHAVIORAL HEALTH SERVICES

Address: 500 WEST HOSPITAL ROAD City, State Zip: FRENCH CAMP, CA 95231

Phone: (209) 468-6208 Fax: (209) 468-7032

Record ID: 390002EN

Service Type: RES
Resident Capacity: 28
Total Occupancy: 53
Target Population: 1.3

Expiration Date: 1/31/2018 IMS: No

Program Name: THREE RIVERS INDIAN LODGE
Legal Name: NATIVE DIRECTIONS, INC.
Address: 13505 SOUTH UNION ROAD

City, State Zip: MANTECA, CA 95336

Phone: (209) 858-2421 Fax: (209) 858-4692

Record ID: 390003AN

Service Type: RES
Resident Capacity: 20
Total Occupancy: 20
Target Population: 1.2

Expiration Date: 5/31/2019 IMS: No

Program Name: NEW DIRECTIONS

Legal Name: ALCOHOL AND DRUG AWARENESS PROGRAM

Address: 1981 CHEROKEE ROAD City, State Zip: STOCKTON, CA 95205

Phone: (209) 870-6506 Fax: (209) 870-6521

Record ID: 390007BN Service Type: RES-DETOX

Resident Capacity: 90 Total Occupancy: 95 Target Population: 1.1

Expiration Date: 2/29/2020 IMS: No

Program Name: NEW DIRECTIONS

Legal Name: ALCOHOL AND DRUG AWARENESS PROGRAM

Address: 1981 CHEROKEE ROAD,

OP MEETING ROOM STOCKTON, CA 95205

Phone: (209) 870-6500 Fax: (209) 870-6521

Record ID: 390007CN
Service Type: NON
Target Population: 1.1

City, State Zip:

Expiration Date: 2/29/2020 IMS: No

Program Name: SERVICE FIRST OUTPATIENT PROGRAM
Legal Name: SERVICE FIRST OF NORTHERN CALIFORNIA

Address: 1222 MONACO COURT, SUITE 28

City, State Zip: STOCKTON, CA 95207

Phone: (209) 644-6327 Fax: (209) 644-6327

Record ID: 390017AN
Service Type: NON
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: SERVICE FIRST OUTPATIENT PROGRAM

Legal Name: SERVICE FIRST OF NORTHERN CALIFORNIA

Address: 445 W. WEBER AVENUE, SUITE 129 City, State Zip: STOCKTON, CA 95203

Phone: (209) 644-4829

Record ID: 390017BN
Service Type: NON
Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: VALLEY COMMUNITY COUNSELING SERVICES, INC. Legal Name: VALLEY COMMUNITY COUNSELING SERVICES, INC.

Address: 129 E. CENTER STREET, SUITE 4

City, State Zip: MANTECA, CA 95336

Phone: (209) 823-1911 Fax: (209) 823-1931

Record ID: 390029AN Service Type: NON

Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name:VALLEY COMMUNITY COUNSELING SERVICESLegal Name:VALLEY COMMUNITY COUNSELING SERVICES, INC.

Address: 1300 WEST LODI AVENUE, SUITE G1+ G2

City, State Zip: LODI, CA 95242

Phone: (209) 334-2126 Fax: (209) 334-9340

Record ID: 390029BN

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: VALLEY COMMUNITY COUNSELING SERVICES, INC. Legal Name: VALLEY COMMUNITY COUNSELING SERVICES, INC.

Address: 19 EAST 6TH STREET City, State Zip: TRACY, CA 95376

Phone: (209) 835-8583 Fax: (209) 835-2910

Record ID: 390029CN Service Type: NON

Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

PACIFIC VALLEY RECOVERY CENTER, INCORPORATED Program Name: Legal Name: PACIFIC VALLEY RECOVERY CENTER, INCORPORATED

Address: 1125 N. HUNTER STREET, SUITE 14-A

City, State Zip: STOCKTON, CA 95202

(209) 817-5720 Fax: (209) 466-7627 Phone:

Record ID: 390030AN

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: FRESH BEGINNING, INC.
Legal Name: FRESH BEGINNING, INC.
Address: 72 WEST 11777

72 WEST 11TH STREET, SUITE A

City, State Zip: TRACY, CA 95376

(209) 830-7400 Fax: (209) 833-8386 Phone:

Record ID: 390031AN Service Type: NON Target Population: 1.5

Expiration Date: 11/30/2017 IMS: No

STOCKTON CIRCLE OF FRIENDS ADULT PROGRAM
STOCKTON CIRCLE OF FRIENDS Program Name: Legal Name: STOCKTON CIRCLE OF FRIENDS ADULT PROGRAMS

Address: 3120 AND 3128 EAST ANITA STREET

City, State Zip: STOCKTON, CA 95205

(209) 451-0315 Fax: (209) 451-0602 Phone:

Record ID: 390032AN

Service Type: RES Resident Capacity: 18 Total Occupancy: 18
Target Population: 1.2

Expiration Date: 6/30/2019 IMS:

State of California, Department of Health Care Services Licensed Residential Facilities and/or Certified Alcohol and Drug Programs

As of 11/1/2017

San Luis Obispo County

Program Name: SAN LUIS OBISPO COUNTY DRUG AND ALCOHOL SERVICES Legal Name: SAN LUIS OBISPO COUNTY DRUG AND ALCOHOL SERVICES Address: 2180 JOHNSON AVENUE, ROOMS 101-148 AND BLUE ROOM

City, State Zip: SAN LUIS OBISPO, CA 93401

Phone: (805) 781-4275

Record ID: 400003AN Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: Legal Name: Address: SAN LUIS OBISPO COUNTY DRUG AND ALCOHOL SERVICES SAN LUIS OBISPO COUNTY DRUG AND ALCOHOL SERVICES

1523 LONGBRANCH AVENUE City, State Zip: GROVER BEACH, CA 93433

Phone: (805) 473-7080 Fax: (805) 473-7188

Record ID: 400003DN

Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2018 IMS: Nο

Program Name: CENTRAL COAST FREEDOM CENTER Legal Name: ARTEMIS HILL RECOVERY INC. Address: 6005 CAPISTRANO AVENUE, SUITE C, D, E, F, G & H

ATASCADERO, CA 93422 City, State Zip:

Phone: (805) 461-1519

Record ID: 400005AP Service Type: NON Target Population: 1.1

7/31/2019 Expiration Date: IMS: No

Legal Name:
Address: BRYAN'S HOUSE BRYAN'S HOUSE

6480 NORTH STAR LANE

City, State Zip: PASO ROBLES, CA 93446-7639

Phone: (805) 591-9233 Fax: (805) 238-6309

400008AP Record ID: Service Type: RES

Resident Capacity: 5 Total Occupancy: 16 Target Population: 1.12

Expiration Date: 4/30/2018 IMS: No

THE HAVEN AT PISMO Program Name: Legal Name: TIKVA TREATMENT, LLC Address: 929 HIDDEN PINE LANE City, State Zip: ARROYO GRANDE, CA 93420

Phone: (805) 202-3440

Record ID: 400009AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No Program Name: THE HAVEN AT PISMO
Legal Name: TIKVA TREATMENT, LLC
Address: 621 EAST GRAND AVENUE
City, State Zip: ARROYO GRANDE, CA 93420

Phone: (805) 202-3440 Fax: (805) 202-3441

Record ID: 400009BP

Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: THE HAVEN AT PISMO
Legal Name: TIKVA TREATMENT, LLC
Address: 2030 IDYLLWILD PLACE
City, State Zip: ARROYO GRANDE, CA 93420

Phone: (805) 202-3440

Record ID: 400009CP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: THE HAVEN AT PISMO
Legal Name: TIKVA TREATMENT, LLC

Address: 944 VIA SOLANA

City, State Zip: ARROYO GRANDE, CA 93420

Phone: (805) 202-3440

Record ID: 400009DP Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 10
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: KEN STARR MD WELLNESS GROUP

Legal Name: KEN STARR, M.D. WELLNESS GROUP, INC.

Address: 107 NELSON STREET

City, State Zip: ARROYO GRANDE, CA 93420

Phone: (805) 242-1360 Fax: (805) 528-8178

Record ID: 400010AP
Service Type: NON-DETOX

Target Population: 1.7

Expiration Date: 8/31/2019 IMS: No

State of California, Department of Health Care Services Licensed Residential Facilities and/or Certified Alcohol and Drug Programs

As of 11/1/2017

San Mateo County

Program Name: PALM AVENUE SOCIAL MODEL DETOXIFICATION

Legal Name: HORIZON SERVICES, INCORPORATED

Address: 2251 PALM AVENUE City, State Zip: SAN MATEO, CA 94403

Phone: (650) 513-6500 Fax: (650) 513-6506

Record ID: 410003AN
Service Type: RES-DETOX

Resident Capacity: 22 Total Occupancy: 22 Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No

Program Name: BETTS HOUSE
Legal Name: PROJECT NINETY

Address: 23 AND 29 NORTH GRANT STREET

City, State Zip: SAN MATEO, CA 94401

Phone: (650) 579-7881 Fax: (650) 579-2640

Record ID: 410005CN

Service Type: RES
Resident Capacity: 10
Total Occupancy: 11
Target Population: 1.2

Expiration Date: 10/31/2017 IMS: No

Program Name: ELLIOTT CENTER
Legal Name: PROJECT NINETY
Address: 314 BADEN AVENUE

City, State Zip: SOUTH SAN FRANCISCO, CA 94080

Phone: (650) 579-7881 Fax: (650) 579-2640

Record ID: 410005MN

Service Type: RES
Resident Capacity: 8
Total Occupancy: 10
Target Population: 1.2

Expiration Date: 10/31/2018 IMS: No

Program Name:BRENNER HOUSELegal Name:PROJECT NINETYAddress:535 BADEN AVENUE

City, State Zip: SOUTH SAN FRANCISCO, CA 94080

Phone: (650) 579-7881

Record ID: 410005RN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 8
Target Population: 1.2

Expiration Date: 10/31/2018 IMS: No

Program Name:PROJECT NINETYLegal Name:PROJECT NINETYAddress:416 2ND AVENUECity, State Zip:SAN MATEO, CA 94401

Phone: (650) 579-7157 Ext:0 Fax: (650) 579-2640

Record ID: 410005VN
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: PROJECT NINETY Legal Name: PROJECT NINETY

Address: 114 SOUTH DELAWARE STREET

City, State Zip: SAN MATEO, CA 94401

Phone: (650) 375-8103 Fax: (650) 579-2640

Record ID: 410005YN Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.2

Expiration Date: 7/31/2019 IMS: No

Program Name: PYRAMID ALTERNATIVES

Legal Name: PYRAMID ALTERNATIVES COUNSELING AND EDUCATION, INC.

Address: 480 MANOR PLAZA City, State Zip: PACIFICA, CA 94044

Phone: (650) 355-8787 (650) 355-8780 Fax:

Record ID: 410006AN Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

PYRAMID ALTERNATIVES Program Name:

Legal Name: PYRAMID ALTERNATIVES COUNSELING AND EDUCATION, INC.

Address: 1590 EL CAMINO REAL, UNITS H AND J

City, State Zip: SAN BRUNO, CA 94066

Phone: (650) 355-8787 Fax: (650) 355-8780

Record ID: 410006CN

Service Type: NON

Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

OUR COMMON GROUND EPA Program Name: Legal Name: OUR COMMON GROUND, INC. Address: 2560 PULGAS AVENUE

City, State Zip: EAST PALO ALTO, CA 94303

Phone: (650) 325-6466 Fax: (650) 364-7987

410012CN Record ID:

RES Service Type: Resident Capacity: 32 Total Occupancy: Target Population: 1.1

8/31/2018 Expiration Date: IMS: No

Program Name: HOPE HOUSE

Legal Name: SERVICES LEAGUE OF SAN MATEO COUNTY 3787-A, 3787-B AND 3789 HOOVER STREET Address:

City, State Zip: REDWOOD CITY, CA 94063

Phone: (650) 363-8735 Fax: (650) 363-8701

Record ID: 410013AN

Service Type: RES Resident Capacity: 16 Total Occupancy: 20 Target Population: 1.4

5/31/2019 IMS: Expiration Date: No

CASA MARIA RECOVERY HOME Program Name:

LATINO COMMISSION ON ALCOHOL AND Legal Name:

DRUG ABUSE SERVICES OF SAN MATEO COUNTY, INC.

508 7TH AVENUE Address:

City, State Zip: SAN BRUNO, CA 94066-4522

Phone: (650) 244-1444 Fax: (650) 244-1444

Record ID: 410020AN

Service Type: RES Resident Capacity: 9 Total Occupancy: 9 Target Population: 1.3

Expiration Date: 4/30/2019 IMS: No Program Name: CASA AZTLAN RECOVERY HOME

Legal Name: LATINO COMMISSION ON ALCOHOL AND

DRUG ABUSE SERVICES OF SAN MATEO COUNTY, INC.

Address: 401 BRIARFIELD WAY
City, State Zip: BELMONT, CA 94002
Phone: (650) 355-7573

Record ID: 410020DN
Service Type: RES
Resident Capacity: 9
Total Occupancy: 9
Target Population: 1.2

Expiration Date: 4/30/2019 IMS: No

Program Name: LATINO COMMISSION-ENTRE FAMILIA OUTPATIENT

Legal Name: LATINO COMMISSION ON ALCOHOL AND

DRUG ABUSE SERVICES OF SAN MATEO COUNTY, INC.

Address: 301 GRAND AVENUE, SUITE 301 City, State Zip: SOUTH SAN FRANCISCO, CA 94080

Phone: (650) 244-1444 Fax: (650) 244-1447

Record ID: 410020IN
Service Type: NON
Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: SITIKE COUNSELING CENTER

Legal Name: SITIKE

Address: 306 SPRUCE AVENUE

City, State Zip: SOUTH SAN FRANCISCO, CA 94080

Phone: (650) 589-9305 Fax: (650) 589-9330

Record ID: 410023AN
Service Type: NON

Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: EL CENTRO DE LIBERTAD/THE FREEDOM CENTER, INC. Legal Name: EL CENTRO DE LIBERTAD/THE FREEDOM CENTER, INC.

Address: 500 ALLERTON STREET City, State Zip: REDWOOD CITY, CA 94063

Phone: (650) 599-9955 Fax: (950) 599-9273

Record ID: 410026CN

Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: EL CENTRO DE LIBERTAD/THE FREEDOM CENTER, INC.

Legal Name: EL CENTRO DE LIBERTAD/THE FREEDOM CENTER, INC.

Address: 225 SOUTH CABRILLO HIGHWAY, BUILDING D, SUITE # 105

City, State Zip: HALF MOON BAY, CA 94019

Phone: (650) 560-9995 Fax: (650) 599-9273

Record ID: 410026DN

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: WALKER HOUSE/ WILLIAMS HOUSE I AND II

Legal Name: FREE AT LAST: COMMUNITY RECOVERY AND REHABILITATION SERVICES

Address: 1085-A, 1085-B AND 1095 WEEKS STREET

City, State Zip: EAST PALO ALTO, CA 94303

Phone: (650) 462-6999 Fax: (650) 462-1055

Record ID: 410027AN

Service Type: RES Resident Capacity: 18 Total Occupancy: 18 Target Population: 1.2

Expiration Date: 8/31/2019 IMS: No

Program Name: MALAIKA HOUSE

Legal Name: FREE AT LAST: COMMUNITY RECOVERY AND REHABILITATION SERVICES

Address: 819 & 823 JAMIE LANE City, State Zip: EAST PALO ALTO, CA 94303

Phone: (650) 462-6999 Fax: (650) 462-1055

Record ID: 410027BN
Service Type: RES
Resident Capacity: 10
Total Occupancy: 14
Target Population: 1.4

Expiration Date: 8/31/2019 IMS: No

Program Name: FREE AT LAST

Legal Name: FREE AT LAST: COMMUNITY RECOVERY AND REHABILITATION SERVICES

Address: 1796 BAY ROAD

City, State Zip: EAST PALO ALTO, CA 94303

Phone: (650) 462-6999 Fax: (650) 462-1055

Record ID: 410027IN
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: ARCHWAY
Legal Name: STARVISTA

Address: 609 PRICE AVENUE, ROOMS 107, 201, 205, AND 206

City, State Zip: REDWOOD CITY, CA 94063

Phone: (650) 366-8433 Fax: (650) 366-8455

Record ID: 410038AN

Service Type: NON

Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: INSIGHTS
Legal Name: STARVISTA

Address: 333 GELLERT BOULEVARD #206

City, State Zip: DALY CITY, CA 94015

Phone: (650) 755-0858 Fax: (650) 755-1754

Record ID: 410038BN

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: FIRST CHANCE SOUTH

Legal Name: STARVISTA

Address: 826 MAHLER ROAD City, State Zip: BURLINGAME, CA 94010

Phone: (650) 595-8165 Fax: (650) 595-8167

Record ID: 410038DN

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: WOMEN'S ENRICHMENT CENTER

Legal Name: STARVISTA

Address: 335 QUARRY ROAD City, State Zip: SAN CARLOS, CA 94070

Phone: (650) 591-3636 Fax: (650) 591-3600

Record ID: 410038EN

Service Type: NON Target Population: 1.3

Expiration Date: 1/31/2018 IMS: No

Program Name: JERICHO PROJECT Legal Name: JERICHO PROJECT

163 AND 193 DEL PRADO DRIVE Address:

City, State Zip: DALY CITY, CA 94015

Phone: (650) 994-9832 Fax: (415) 467-7450

Record ID: 410041BN Service Type: RES Resident Capacity: 24 Total Occupancy: 24 Target Population: 1.2

Expiration Date: 3/31/2019 IMS: No

Program Name: JERICHO PROJECT Legal Name: JERICHO PROJECT Address: 470 VALLEY DRIVE City, State Zip: BRISBANE, CA 94005

(415) 656-1700 Phone: (415) 715-0174 Fax:

Record ID: 410041DN Service Type: NON Target Population: 1.2

Expiration Date: 10/31/2018 IMS:

Program Name: OUTPATIENT DRUG AND ALCOHOL SERVICES FOR ASIANS (ODASA)

Legal Name: HEALTHRIGHT 360 Address: 6181 MISSION STREET City, State Zip: DALY CITY, CA 94014 Phone: (415) 337-0140 410043AN

Record ID: Service Type: NON

Target Population: 1.1

Expiration Date: 11/30/2018 IMS:

HEALTHRIGHT 360 - AARS YOUTH SERVICES OF SAN MATEO Program Name:

Legal Name: HEALTHRIGHT 360 Address: 1115 MISSION ROAD

City, State Zip: SOUTH SAN FRANCISCO, CA 94080

Phone: (650) 243-4850 Fax: (650) 243-4851

410043BN Record ID: NON Service Type:

Target Population: 1.5

Expiration Date: 5/31/2018 IMS: Nο

WRA, HILLSIDE HOUSE ONE Program Name:

Legal Name: HEALTHRIGHT 360

Address: 27 NORTH HUMBOLDT STREET, UNIT A & UNIT B

City, State Zip: SAN MATEO, CA 94401

(650) 348-6603 Fax: (415) 865-0119 Phone:

Record ID: 410043DN

Service Type: RES Resident Capacity: 5 Total Occupancy: 11 Target Population: 1.4

9/30/2019 Expiration Date: IMS: No

Program Name: WRA, THE ELMS Legal Name: HEALTHRIGHT 360

202 EAST BELLEVUE AVENUE Address: SAN MATEO, CA 94401 City, State Zip:

Phone: (650) 348-6603

Record ID: 410043EN Service Type: RES Resident Capacity: Total Occupancy: 16 Target Population: 1.3

Expiration Date: 2/28/2018 IMS: No Program Name: WRA, LAUREL HOUSE
Legal Name: HEALTHRIGHT 360
Address: 900 LAUREL AVENUE
City, State Zip: SAN MATEO, CA 94401
Phone: (650) 347-8808

Record ID: 410043FN
Service Type: RES
Resident Capacity: 12
Total Occupancy: 13
Target Population: 1.3

Expiration Date: 2/28/2018 IMS: No

Program Name: HEALTHRIGHT 360
Legal Name: HEALTHRIGHT 360

Address: 2015 PIONEER COURT, SUITE B

City, State Zip: SAN MATEO, CA 94403

Phone: (415) 762-3700 Record ID: 410043GN

Service Type: NON
Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: EAST PALO ALTO YOUTH SERVICES

Legal Name: HEALTHRIGHT 360
Address: 2396 UNIVERSITY AVE

City, State Zip: EAST PALO ALTO, CA 94303

Phone: (415) 786-3993 Fax: (415) 865-0119

Record ID: 410043HN Service Type: NON

Target Population: 1.5

Expiration Date: 8/31/2019 IMS: No

State of California, Department of Health Care Services Licensed Residential Facilities and/or Certified Alcohol and Drug Programs

As of 11/1/2017

Santa Barbara County

Program Name: RECOVERY POINT ACUTE CARE
Legal Name: GOOD SAMARITAN SHELTER
Address: 401 'B' W. MORRISON AVENUE
City, State Zip: SANTA MARIA, CA 93458

Phone: (805) 347-3338

Record ID: 420010BN Service Type: RES-DETOX

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: ANOTHER ROAD DETOX PROGRAM
Legal Name: GOOD SAMARITAN SHELTER
Address: 113 SOUTH M STREET
City, State Zip: LOMPOC, CA 93436

Phone: (805) 736-0357 Ext:207 Fax: (805) 346-8656

Record ID: 420010DN Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: TURNING POINT

Legal Name: GOOD SAMARITAN SHELTER
Address: 604 WEST OCEAN AVENUE
City, State Zip: LOMPOC, CA 93436

Phone: (805) 736-0357 Fax: (866) 969-9350

Record ID: 420010EN
Service Type: NON
Target Population: 1.3

Expiration Date: 11/30/2018 IMS: No

Program Name: RECOVERY POINT OUTPATIENT PROGRAM

Legal Name: GOOD SAMARITAN SHELTER

Address: 245 E. INGER DRIVE, SUITE 103B

City, State Zip: SANTA MARIA, CA 93454

Phone: (805) 346-8185 Fax: (805) 346-8656

Record ID: 420010FN
Service Type: NON
Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: CASA DE FAMILIA TREATMENT CENTER

Legal Name: GOOD SAMARITAN SHELTER
Address: 403 'B' WEST MORRISON
City, State Zip: SANTA MARIA, CA 93454

Phone: (805) 332-3647 Fax: (866) 653-2634

Record ID: 420010GN
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name:LOMPOC RECOVERY CENTERLegal Name:GOOD SAMARITAN SHELTERAddress:104 SOUTH C STREET, SUITE A

City, State Zip: LOMPOC, CA 93436 Phone: (805) 332-3647

Record ID: 420010HN
Service Type: NON
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: SANTA BARBARA RESCUE MISSION - RECOVERY PROGRAM

Legal Name: SANTA BARBARA RESCUE MISSION Address: 535 EAST YANONALI STREET, A City, State Zip: SANTA BARBARA, CA 93103

Phone: (805) 966-1316 Fax: (805) 966-7495

Record ID: 420016AN

Service Type: RES
Resident Capacity: 45
Total Occupancy: 45
Target Population: 1.2

Expiration Date: 2/28/2019 IMS: No

Program Name: BETHEL HOUSE

Legal Name: SANTA BARBARA RESCUE MISSION Address: 24 WEST ARRELLEGA STREET City, State Zip: SANTA BARBARA, CA 93101

Phone: (805) 966-1316 Fax: (805) 879-8229

Record ID: 420016BN

Service Type: RES
Resident Capacity: 24
Total Occupancy: 25
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: RECOVERY SANTA BARBARA OUTPATIENT SERVICES

Legal Name: SANTA BARBARA RESCUE MISSION Address: 535 EAST YANONALI STREET, B City, State Zip: SANTA BARBARA, CA 93103

Phone: (805) 966-1316 Ext:600 Fax: (805) 966-7495

Record ID: 420016CN

Service Type: NON Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: COTTAGE RESIDENTIAL CENTER

Legal Name: SANTA BARBARA COTTAGE HOSPITAL

Address: 316 MONTECITO STREET City, State Zip: SANTA BARBARA, CA 93101

Phone: (805) 569-7815 Fax: (805) 965-6242

Record ID: 420017AN

Service Type: RES
Resident Capacity: 24
Total Occupancy: 24
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: PROJECT RECOVERY - ADULT OUTPATIENT TREATMENT PROGRAM

Legal Name: COUNCIL ON ALCOHOLISM AND DRUG ABUSE

Address: 133 EAST HALEY STREET City, State Zip: SANTA BARBARA, CA 93101

Phone: (805) 564-6057 Fax: (805) 963-8849

Record ID: 420022AN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: DANIEL BRYANT YOUTH AND FAMILY TREATMENT CENTER

Legal Name: COUNCIL ON ALCOHOLISM AND DRUG ABUSE

Address: 1111 GARDEN STREET City, State Zip: SANTA BARBARA, CA 93101

Phone: (805) 730-7575 Fax: (805) 730-7503

Record ID: 420022BN
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: PC1000

Legal Name: COUNCIL ON ALCOHOLISM AND DRUG ABUSE

Address: 232 EAST CANON PERDIDO STREET

City, State Zip: SANTA BARBARA, CA 93101

Phone: (805) 963-1433 Fax: (805) 963-4099

Record ID: 420022DN
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: PROJECT RECOVERY RESIDENTIAL DETOX PROGRAM

Legal Name: COUNCIL ON ALCOHOLISM AND DRUG ABUSE

Address: 1020 PLACIDO AVENUE City, State Zip: SANTA BARBARA, CA 93103

Phone: (805) 963-1836 Fax: (805) 963-8849

Record ID: 420022EN
Service Type: RES-DETOX

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: CASA SERENA RESIDENTIAL RECOVERY PROGRAM

Legal Name: CASA SERENA Address: 1515 BATH STREET

City, State Zip: SANTA BARBARA, CA 93101

Phone: (805) 564-8701 Fax: (805) 966-6695

Record ID: 420024AN

Service Type: RES
Resident Capacity: 18
Total Occupancy: 18
Target Population: 1.3

Expiration Date: 6/30/2019 IMS: No

Program Name: CASA SERENA RESIDENTIAL RECOVERY PROGRAM

Legal Name: CASA SERENA Address: 147 OLIVER ROAD

City, State Zip: SANTA BARBARA, CA 93108

Phone: (805) 965-1625 Fax: (805) 966-6695

Record ID: 420024CN

Service Type: RES
Resident Capacity: 6
Total Occupancy: 16
Target Population: 1.4

Expiration Date: 6/30/2019 IMS: No

Program Name: SANCTUARY CENTERS OF SANTA BARBARA, INC.
Legal Name: SANCTUARY CENTERS OF SANTA BARBARA, INC.

Address: 222 WEST VALERIO, REAR BUILDING

City, State Zip: SANTA BARBARA, CA 93101

Phone: (805) 569-2785 Fax: (805) 563-1977

Record ID: 420026AN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

COAST VALLEY SUBSTANCE ABUSE TREATMENT CENTER Program Name:

Legal Name: COAST VALLEY WORSHIP CENTER Address: 1414 S. MILLER STREET, SUITE 11

City, State Zip: SANTA MARIA, CA 93454

(805) 739-1512 (805) 349-2855 Phone: Fax:

Record ID: 420030AN NON Service Type:

Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

RECOVERY ROAD MEDICAL CENTER Program Name: Legal Name: RECOVERY ROAD MEDICAL CENTER, INC.

Address: 3891 STATE STREET, SUITE 205

City, State Zip: SANTA BARBARA, CA 93105

(805) 962-7800 Phone: Fax: (805) 962-9002

Record ID: 420034AP Service Type: NON Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: THE TIDES SANTA BE Legal Name: THE TIDES SANTA BE 5277 AUSTIN ROAD THE TIDES SANTA BARBARA

THE TIDES SANTA BARBARA, LLC

City, State Zip: SANTA BARBARA, CA 93111

Phone: (805) 203-6211 Fax: (888) 552-0299

Record ID: 420035AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6
Target Population: 1.1

Expiration Date: 10/31/2017 IMS:

THE OAKS - A RESIDENTIAL TREATMENT PROGRAM AT THE CHAMPION CENTER Program Name:

Legal Name: LOMPOC VALLEY MEDICAL CENTER

Address: 303 SOUTH C STREET City, State Zip: LOMPOC, CA 93436

Phone: Fax: (805) 737-3304 (805) 737-3321

Record ID: 420036AP

Service Type: RES Resident Capacity: 16 Total Occupancy: 16 Target Population: 1.1

3/31/2019 Expiration Date: IMS: No

Program Name: CHANGES

Legal Name: Address: AMERICAN RIVIERA LLC

403 EAST MONTECITO STREET, SUITE A

City, State Zip: SANTA BARBARA, CA 93101

Phone: (805) 883-1155 Fax: (805) 883-1188

Record ID: 420037AP

Service Type: NON Target Population: 1.1

9/30/2019 Expiration Date: IMS: Nο

Program Name: LADIES RECOVERY 4 LIFE RESIDENTIAL TREATMENT FACILITY

Legal Name: LADIES RECOVERY 4 LIFE 115 NORTH D STREET, Address:

UNIT A

LOMPOC, CA 93436-6911 City, State Zip:

Phone: (805) 588-4410 Fax: (805) 819-0942

Record ID: 420038AN

Service Type: RES Resident Capacity: 14 Total Occupancy: 14 Target Population: 1.3

2/28/2019 IMS: Expiration Date: Nο Program Name: KEYSTONE RECOVERY

Legal Name: KEYSTONE RECOVERY NETWORK, LLC

Address: 475 BARKER PASS ROAD

UNITS A & B

City, State Zip: MONTECITO, CA 93108 Phone: (805) 363-5576

Record ID: 420039AP
Service Type: RES-DETOX

Resident Capacity: 12 Total Occupancy: 12 Target Population: 1.8

Expiration Date: 12/31/2018 IMS: No

Program Name: IRECOVER BEHAVIORAL HEALTH CLINICS

Legal Name: IRECOVER BEHAVIORAL HEALTH CLINICS, LLC Address: 607 E. PLAZA DRIVE, C-102, C-201, C-202

City, State Zip: SANTA MARIA, CA 93455

Phone: (805) 631-5268

Record ID: 420040AP
Service Type: NON
Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: GOOD HEART RECOVERY

Legal Name: GOOD HEART RECOVERY, LLC Address: 205 W. MISSION STREET City, State Zip: SANTA BARBARA, CA 93101

Phone: (424) 324-7299

Record ID: 420042AP

Service Type: NON

Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

State of California, Department of Health Care Services Licensed Residential Facilities and/or Certified Alcohol and Drug Programs

As of 11/1/2017

Santa Clara County

Program Name: LYRIC RECOVERY SERVICES, INC. LYRIC RECOVERY SERVICES, INC. Legal Name:

Address: 1210 SOUTH BASCOM AVENUE, SUITE 205

City, State Zip: SAN JOSE, CA 95128

Fax: (408) 982-3272 Phone: (408) 216-9826

Record ID: 430013AP

Service Type: NON Target Population: 1.1

12/31/2019 Expiration Date: IMS: No

Program Name: PATHWAY HOUSE PATHWAY SOCIETY

Legal Name: Address: 102 SOUTH 11TH STREET City, State Zip: SAN JOSE, CA 95112

Phone: (408) 998-5191 Fax: (408) 506-1194

Record ID: 430016AN

Service Type: RES Resident Capacity: 65 Total Occupancy: 65 Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: PATHWAY OUTPATIENT CENTER

PATHWAY SOCIETY

Legal Name: Address: 1659 SCOTT BOULEVARD, SUITE 9, 220, AND 270

City, State Zip: SANTA CLARA, CA 95050

Phone: (408) 244-1834 (408) 244-5123 Fax:

Record ID: 430016BN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: PATHWAY SOCIETY Legal Name: PATHWAY SOCIETY

Address: 16433 MONTEREY STREET, SUITE 140

City, State Zip: MORGAN HILL, CA 95037

(408) 782-6300 Phone: Fax: (408) 782-6363

Record ID: 430016DN Service Type: NON

Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name: MARIPOSA LODGE Legal Name: PATHWAY SOCIETY Address: 9500 MALECH ROAD SAN JOSE, CA 95151 City, State Zip:

Phone: (408) 281-6555 Fax: (408) 244-5123

Record ID: 430016FN

Service Type: RES Resident Capacity: 64 Total Occupancy: Target Population: 1.3

Expiration Date: 9/30/2019 IMS: No Program Name: HORIZON SOUTH

Legal Name: HORIZON SERVICES, INCORPORATED

650 SOUTH BASCOM AVENUE Address: City, State Zip: SAN JOSE, CA 95128

Fax: (408) 295-8544 Phone: (408) 295-6675

Record ID: 430021AN RES-DETOX Service Type:

Resident Capacity: 41 Total Occupancy: 41 Target Population: 1.2

Expiration Date: 8/31/2018 IMS: No

Program Name: SUPPORT SYSTEMS HOMES, INC. Legal Name: SUPPORT SYSTEMS HOMES, INC. Address: 173 NORTH MORRISON AVENUE

City, State Zip: SAN JOSE, CA 95126

Phone: (408) 370-9688 Fax: (408) 370-3487

Record ID: 430027GP Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

SUPPORT SYSTEMS HOMES, INC. Program Name: Legal Name: SUPPORT SYSTEMS HOMES, INC. Address: 264 NORTH MORRISON AVENUE

City, State Zip: SAN JOSE, CA 95126

Phone: (408) 370-9688 Fax: (408) 370-3487

Record ID: 430027HP Service Type: RES Resident Capacity: 32 Total Occupancy: 32 Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: SUPPORT SYSTEMS HOMES, INC./ CADS, INC.

Legal Name: SUPPORT SYSTEMS HOMES, INC. Address: 1271 & 1281 FLEMING AVENUE

SAN JOSE, CA 95127 City, State Zip:

Phone: (408) 370-9688 Fax: (408) 370-3487

Record ID: 430027JP Service Type: RES Resident Capacity: 27 Total Occupancy: 27 Target Population: 1.1

10/31/2017 Expiration Date: TMS: Nο

THE CAMP - OUTPATIENT SERVICES Program Name: Legal Name: THE CAMP RECOVERY CENTER, LLC Address: 256 EAST HAMILTON AVENUE, SUITE I

City, State Zip: CAMPBELL, CA 95008 (408) 866-8167 Phone: 430034AP

Record ID: Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2017 IMS: No

Program Name: SUMMIT RANCH

Legal Name: ADVENT GROUP MINISTRIES, INC. Address: 1200 WEST EDMUNDSON AVENUE City, State Zip: MORGAN HILL, CA 95037

(408) 779-1492 (408) 604-0162 Phone: Fax:

Record ID: 430038CN

Service Type: DSS Target Population: 1.5

Expiration Date: 11/30/2018 IMS: No Program Name: LAUREL HOME

Legal Name: ADVENT GROUP MINISTRIES, INC.

Address: 865 BLACK WALNUT COURT City, State Zip: MORGAN HILL, CA 95037

Phone: (408) 779-5841 Fax: (408) 604-0162

Record ID: 430038DN Service Type: DSS

Target Population: 1.5

Expiration Date: 11/30/2018 IMS: No

Program Name: GATEWAY HOME

Legal Name: ADVENT GROUP MINISTRIES, INC.

Address: 1960 CHURCH AVENUE City, State Zip: SAN MARTIN, CA 95046

Phone: (408) 683-2099 Fax: (425) 686-0776

Record ID: 430038EN
Service Type: DSS

Service Type: DSS Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: AMICUS HOUSE, INC. Legal Name: AMICUS HOUSE, INC.

Address: 466 SOUTH BUENA VISTA AVENUE

City, State Zip: SAN JOSE, CA 95126 Phone: (408) 294-2277

Record ID: 430041AP
Service Type: RES
Resident Capacity: 14
Total Occupancy: 14
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: ASIAN AMERICANS FOR COMMUNITY INVOLVEMENT

Legal Name: THE ASIAN AMERICANS FOR COMMUNITY INVOLVEMENT OF SANTA CLARA COUNTY, INC.

Address: 2400 MOORPARK AVENUE, SUITES 210 AND300

City, State Zip: SAN JOSE, CA 95128

Phone: (408) 975-2730 Fax: (408) 975-2745

Record ID: 430042AN

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: CALWORKS DUAL DIAGNOSIS PROGRAM
Legal Name: THE GARDNER FAMILY CARE CORPORATION
Address: 160 EAST VIRGINIA STREET, SUITE 280

City, State Zip: SAN JOSE, CA 95112

Phone: (408) 287-6200 Fax: (408) 998-1535

Record ID: 430045AN

Service Type: NON Target Population: 1.8

Expiration Date: 5/31/2019 IMS: No

Program Name: PROYECTO PRIMAVERA ADULT OUTPATIENT PROGRAM

Legal Name: THE GARDNER FAMILY CARE CORPORATION

Address: 614 TULLY ROAD
City, State Zip: SAN JOSE, CA 95111

Phone: (408) 287-6200 Ext:2190 Fax: (408) 977-1136

Record ID: 430045BN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: INDIAN HEALTH CENTER OF SANTA CLARA VALLEY-OUTPATIENT ALCOHOL & OTHER DRUG

PROGR

Legal Name: INDIAN HEALTH CENTER OF SANTA CLARA VALLEY
Address: 602 EAST SANTA CLARA STREET, SUITE 230

City, State Zip: SAN JOSE, CA 95112

1.1

Phone: (408) 350-2400 Fax: (408) 350-2411

Record ID: 430047CN Service Type: NON

Target Population:

Expiration Date: 11/30/2018 IMS: No

Program Name: NEW LIFE RECOVERY CENTERS

Legal Name: NEW LIFE RECOVERY CENTERS, INC.

473 NORTH SAN PEDRO Address: City, State Zip: SAN JOSE, CA 95110-2229

(408) 297-1182 Phone: Fax: (408) 297-7450

Record ID: 430053AP RES-DETOX Service Type:

Resident Capacity: 18 Total Occupancy: 18 Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: NEW LIFE RECOVERY CENTERS, INC. Legal Name: NEW LIFE RECOVERY CENTERS, INC.

Address: 1101 PARK AVENUE City, State Zip: SAN JOSE, CA 95126

(408) 271-0199 Phone: (408) 297-7450 Fax:

Record ID: 430053BP Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS:

NEW LIFE RECOVERY CENTERS, INC. Program Name: Legal Name: NEW LIFE RECOVERY CENTERS, INC.

Address: 166 CLAYTON AVENUE

City, State Zip: SAN JOSE, CA 95110-2210

Phone: (408) 975-0454 Fax: (408) 230-0395

Record ID: 430053CP

Service Type: RES Resident Capacity: 6 Total Occupancy: 8 Target Population: 1.1

1/31/2018 IMS: Expiration Date: No

Program Name: HOUSE OF DAWN

OPERATION DAWN Legal Name:

Address: 5034 PAGE MILL DRIVE SAN JOSE, CA 95111-4055 City, State Zip:

Phone: (408) 362-0121

430059AN Record ID: Service Type: RES Resident Capacity: 6 Total Occupancy: 8 Target Population: 1.2

Expiration Date: 11/30/2018 TMS: Nο

POSITIVE PROGRESSIONS RESIDENTIAL TREATMENT CENTERS, INC. Program Name: Legal Name: POSITIVE PROGRESSIONS RESIDENTIAL TREATMENT CENTERS, INC

Address: 1721 LOLLIE COURT City, State Zip: SAN JOSE, CA 95124 (408) 476-4888 Phone:

Record ID: 430065AN Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

8/31/2019 IMS: Expiration Date: No

Program Name: ADI-OUTPATIENT Legal Name: ADI- OP, INC.

1900 CAMDEN AVENUE, SUITE 202 AND 205 Address:

City, State Zip: SAN JOSE, CA 95124

Phone: (408) 879-7581 Fax: (408) 879-7587

Record ID: 430068AP

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

EMQ FAMILIESFIRST OUTPATIENT ADOLESCENT SUBSTANCE ABUSE Program Name:

Legal Name: FAMILIESFIRST, INC. Address: 251 LLEWELLYN AVENUE City, State Zip: CAMPBELL, CA 95008 Phone: (408) 379-3796

Record ID: 430070AN Service Type: NON Target Population: 1.5

Expiration Date: 11/30/2017 IMS:

Program Name: PARISI HOUSE ON THE HILL, INC. Legal Name: PARISI HOUSE ON THE HILL, INC.

Address: 9505 MALECH ROAD City, State Zip: SAN JOSE, CA 95138

(408) 281-6570 Fax: (408) 463-1116 Phone:

Record ID: 430071AN Service Type: RES Resident Capacity: 20 Total Occupancy: 42 Target Population: 1.3

Expiration Date: 5/31/2019 IMS: No

LIONROCK RECOVERY Program Name:

Legal Name: LIONROCK BEHAVIORAL HEALTH, INC.

Address: 621 E CAMPBELL AVENUE #17

City, State Zip: CAMPBELL, CA 95008

(760) 994-4990 Phone: Fax: (866) 899-8670

Record ID: 430074AP

Service Type: NON

Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

GREENDALE HOUSE Program Name: Legal Name: GREENDALE HOUSE LLC Address: 401 GREENDALE WAY SAN JOSE, CA 95129 City, State Zip:

(408) 455-2944 Fax: (408) 248-0972 Phone:

Record ID: 430076AP

Service Type: RES Resident Capacity: 14 Total Occupancy: 16 Target Population: 1.2

3/31/2018 Expiration Date: IMS: No

Program Name: SUMMIT ESTATE RECOVERY CENTER

SUMMIT ESTATE, INC. Legal Name: Address: 399 OLD MILL POND ROAD City, State Zip: LOS GATOS, CA 95033

Phone: Fax: (877) 230-5007 (650) 733-4711

Record ID: 430077AP RES-DETOX Service Type:

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: SUMMIT ESTATE OUTPATIENT

SUMMIT ESTATE, INC. Legal Name: Address: 20640 3RD STREET City, State Zip: SARATOGA, CA 95070

(408) 469-4734 (408) 469-4734 Phone: Fax:

Record ID: 430077BP

Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2018 IMS: No Program Name: CENTRAL TREATMENT & RECOVERY

Legal Name: SANTA CLARA COUNTY, DEPARTMENT OF ALCOHOL AND DRUG SERVICES

Address: 976 LENZEN AVENUE, 1ST FLOOR, SUITE 1900

City, State Zip: SAN JOSE, CA 95126-2737

Phone: (408) 792-5656 Fax: (408) 947-8719

Record ID: 430078AN
Service Type: NON
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: ASIAN AMERICAN RECOVERY SERVICES, A HEALTHRIGHT 360 PROGRAM

Legal Name: HEALTHRIGHT 360

Address: 1340 TULLY ROAD, SUITE 301 & 304

City, State Zip: SAN JOSE, CA 95122-3056

Phone: (408) 271-3900 Fax: (415) 865-0119

Record ID: 430079AN
Service Type: NON
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: GENESIS PROJECT

Legal Name: TRUTH RECOVERY FOUNDATION, INC.

Address: 810 PALM STREET
City, State Zip: SAN JOSE, CA 95110
Phone: (408) 500-6229

Record ID: 430080AN
Service Type: RES
Resident Capacity: 16
Total Occupancy: 16
Target Population: 1.2

Expiration Date: 4/30/2019 IMS: No

Program Name: BILL WILSON HOUSE
Legal Name: BILL WILSON CENTER
Address: 3490 THE ALAMEDA

City, State Zip: SANTA CLARA, CA 95050-4333

Phone: (408) 243-0222 Fax: (408) 246-5752

Record ID: 430082AN

Service Type: DSS Target Population: 1.5

Expiration Date: 2/28/2018 IMS: No

Program Name: QUETZAL HOUSE
Legal Name: BILL WILSON CENTER
Address: 509 VIEW STREET

City, State Zip: MOUNTAIN VIEW, CA 94041

Phone: (408) 278-2588 Fax: (408) 278-2590

Record ID: 430082BN

Service Type: DSS Target Population: 1.5

Expiration Date: 9/30/2019 IMS: No

Program Name: LOS GATOS DRUG AND ALCOHOL RECOVERY CENTER

Legal Name: LOS GATOS MEDICAL CENTER, INC.

Address: 16400 LARK AVENUE

SUITE 350

City, State Zip: LOS GATOS, CA 95032

Phone: (408) 384-9717 Fax: (408) 358-2810

Record ID: 430083AP

Service Type: NON Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

LOS GATOS DRUG AND ALCOHOL RECOVERY CENTER Program Name:

Legal Name: LOS GATOS MEDICAL CENTER, INC.

16421 GREENWOOD LANE Address: City, State Zip: MONTE SERENO, CA 95030

Phone: (408) 384-9717 Fax: (408) 358-2810

Record ID: 430083BP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 10/31/2018 IMS:

Program Name: WELLNESS RETREAT RECOVERY CENTER WELLNESS RECOVERY RETREAT CENTER

Legal Name: Address: 495 PIERCY ROAD City, State Zip: SAN JOSE, CA 95138 Phone: (855) 762-3797

430084AP Record ID: Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

9/30/2018 TMS: Expiration Date: Nο

Program Name: FUSION RECOVERY, INC. FUSION RECOVERY, INC. Legal Name: Address: 940 SARATOGA AVENUE, SUITE 240

City, State Zip: SAN JOSE, CA 95129

(408) 474-4840 Phone: Fax: (408) 260-5003

Record ID: 430085AP Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: RED ROAD RECOVERY

Legal Name: RED ROAD TREATMENT, INC. Address: 421 N. 13TH STREET City, State Zip: SAN JOSE, CA 95112 Phone: (650) 703-9185

Record ID: 430086AN Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 8 Target Population: 1.1

IMS: Expiration Date: 10/31/2018 Nο

Program Name: SERENITY GARDENS Legal Name: SERENITY GARDENS 5830 COHASSET WAY Address: City, State Zip: SAN JOSE, CA 95123 Phone: (408) 219-4681

Record ID: 430087AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: FAMILY AND CHILDREN SERVICES, A DIVISION OF CAMINAR

Legal Name: CAMINAR

Address: 2218 and 2226 N. 1ST STREET

City, State Zip: SAN JOSE, CA 95131

Phone: (408) 538-0880 Fax: (408) 943-8155

Record ID: 430088BN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: FAMILY AND CHILDREN SERVICES, A DIVISION OF CAMINAR
Legal Name: CAMINAR
Address: 375 CAMBRIDGE AVE.
City, State Zip: PALO ALTO, CA 94306
Phone: (650) 326-6576 Fax: (650) 326-1340
Record ID: 430088CN
Service Type: Non

Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: FAMILY AND CHILDREN SERVICES, A DIVISION OF CAMINAR
Legal Name: CAMINAR
Address: 950 W. JULIAN STREET

City, State Zip: SAN JOSE, CA 95126
Phone: (408) 292-9353 Fax: (408) 288-6201
Record ID: 430088DN
Service Type: NON

Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

State of California, Department of Health Care Services Licensed Residential Facilities and/or Certified Alcohol and Drug Programs

As of 11/1/2017

Santa Cruz County

Program Name: ALTO COUNSELING CENTER-SOUTH Legal Name: ENCOMPASS COMMUNITY SERVICES

Address: 585 AUTO CENTER DRIVE City, State Zip: WATSONVILLE, CA 95076

Phone: (831) 728-2233 Fax: (831) 722-8311

Record ID: 440001EN

Service Type: NON Target Population: 1.1

12/31/2018 Expiration Date: IMS: No

OUT-PATIENT CLIENT SERVICES

Program Name: Legal Name: Address: JANUS OF SANTA CRUZ 200 7TH AVENUE, SUITE 150 City, State Zip: SANTA CRUZ, CA 95062

Phone: (831) 462-1060 Fax: (831) 423-9015

Record ID: 440003AN

Service Type: NON Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

RESIDENTIAL TREATMENT CENTER & SPECIAL CARE UNIT

Program Name: Legal Name: Address: JANUS OF SANTA CRUZ 200 SEVENTH AVENUE City, State Zip: SANTA CRUZ, CA 95062 Phone: (831) 462-1060

Record ID: 440003BN RES-DETOX Service Type:

Resident Capacity: 24 Total Occupancy: 24 Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: MONDANARO-BASKIN CENTER FOR WOMEN & CHILDREN

Legal Name: JANUS OF SANTA CRUZ Address: 516 CHESTNUT STREET City, State Zip: SANTA CRUZ, CA 95060

Phone: (831) 423-9015 440003DN

Record ID: Service Type: Resident Capacity: 10 Total Occupancy: 24 Target Population: 1.4

Expiration Date: 8/31/2018 IMS: No

SANTA CRUZ RESIDENTIAL RECOVERY Program Name:

Legal Name: ENCOMPASS COMMUNITY SERVICES Address: 125 RIGG STREET

City, State Zip: SANTA CRUZ, CA 95060 Phone: (831) 423-3890

Record ID: 440008AN Service Type: RES Resident Capacity: 30 Total Occupancy: 30

Target Population: 1.1

6/30/2018 IMS: Expiration Date:

Program Name: ALTO COUNSELING CENTER - NORTH
Legal Name: ENCOMPASS COMMUNITY SERVICES

Address: 716 OCEAN STREET, SUITES 170, 200, 230

City, State Zip: SANTA CRUZ, CA 95060-2126

Phone: (831) 423-2003

Record ID: 440008HN
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: SI SE PUEDE

Legal Name: ENCOMPASS COMMUNITY SERVICES

Address: 161 MILES LANE

City, State Zip: WATSONVILLE, CA 95076

Phone: (831) 761-5422

Record ID: 440008LN
Service Type: RES
Resident Capacity: 23
Total Occupancy: 23
Target Population: 1.2

Expiration Date: 6/30/2018 IMS: No

Program Name: ELEVATE ADDICTION SERVICES-SANTA CRUZ

Legal Name: HALCYON HORIZONS, INCORPORATED

Address: 9C MAREA AVENUE

City, State Zip: LA SELVA BEACH, CA 95076

Phone: (831) 768-7190 Fax: (831) 768-4639

Record ID: 440009CN
Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 16 Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: ELEVATE ADDICTION SERVICES-SANTA CRUZ

Legal Name: HALCYON HORIZONS, INCORPORATED

Address: 125 FUCHSIA COURT City, State Zip: FREEDOM, CA 95019

Phone: (831) 768-7190 Fax: (831) 768-4639

Record ID: 440009CN
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 10
Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: ELEVATE ADDICTION SERVICES-SANTA CRUZ

Legal Name: HALCYON HORIZONS, INCORPORATED

Address: 262 GAFFEY ROAD, 80 VISTA VERDE CIRCLE, AND 65 KINGFISHER DRIVE

City, State Zip: WATSONVILLE, CA 95076

Phone: (831) 768-7190 Fax: (831) 768-4639

Record ID: 440009CN
Service Type: RES-DETOX

Resident Capacity: 67
Total Occupancy: 78
Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: ELEVATE ADDICTION SERVICES-SANTA CRUZ OUTPATIENT

Legal Name: HALCYON HORIZONS, INCORPORATED

Address: 9057 SOQUEL DRIVE, BUILDING A, SUITE G

City, State Zip: APTOS, CA 95003

Phone: (831) 768-7190 Fax: (831) 768-0667

Record ID: 440009DN

Service Type: NON Target Population: 1.1

Expiration Date: 12/31/2018 IMS: No

Program Name: NEW LIFE CENTER

Legal Name: NEW LIFE COMMUNITY SERVICES, INC.

Address: 707 AND 717 FAIR AVENUE City, State Zip: SANTA CRUZ, CA 95060

Phone: (831) 427-1007 Record ID: 440010AN

Record ID: 4400
Service Type: RES
Resident Capacity: 38
Total Occupancy: 52
Target Population: 1.7

Expiration Date: 4/30/2019 IMS: No

Program Name: CAMP RECOVERY CENTER

Legal Name: THE CAMP RECOVERY CENTER, LLC

Address: 3192 GLEN CANYON ROAD City, State Zip: SCOTTS VALLEY, CA 95066

Phone: (831) 438-1868

Record ID: 440011AP
Service Type: RES-DETOX

Resident Capacity: 56 Total Occupancy: 60 Target Population: 1.1

Expiration Date: 9/30/2017 IMS: No

Program Name: THE CAMP RECOVERY CENTER-SECTION II

Legal Name: THE CAMP RECOVERY CENTER, LLC

Address: 3192 GLEN CANYON ROAD

City, State Zip: SCOTTS VALLEY, CA 95066-4916

Phone: (831) 438-1868

Record ID: 440011BP
Service Type: DSS
Target Population: 1.5

Expiration Date: 2/28/2019 IMS: No

Program Name: SOBRIETY WORKS
Legal Name: RIKKI RAP, INC.
Address: 8030 SOQUEL AVENUE,

SUITE 103

City, State Zip: SANTA CRUZ, CA 95062-2096

Phone: (831) 476-1747 Fax: (831) 476-1125

Record ID: 440014AP

Service Type: NON

Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

Program Name:COASTAL TURNING POINTLegal Name:COASTAL TURNING POINT INCAddress:129 AND 147 SOUTH RIVER STREET,

SUITE 234A

City, State Zip: SANTA CRUZ, CA 95060-4556

Phone: (831) 234-2010 Fax: (831) 226-2123

Record ID: 440018AP

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

State of California, Department of Health Care Services Licensed Residential Facilities and/or Certified Alcohol and Drug Programs

As of 11/1/2017

Shasta County

Program Name: EMPIRE RECOVERY CENTER Legal Name: EMPIRE HOTEL, EHARC, INC. Address: 1237 CALIFORNIA STREET

City, State Zip: REDDING, CA 96001

Phone: (530) 243-7470 (530) 243-7477 Fax:

Record ID: 450001AN Service Type: RES-DETOX

Resident Capacity: 42 Total Occupancy: 42 Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: EMPIRE OUTPATIENT SERVICES Legal Name: EMPIRE HOTEL, EHARC, INC.

Address: 1616 WEST STREET City, State Zip: REDDING, CA 96001

Phone: (530) 244-7074 (530) 244-7065 Fax:

Record ID: 450001CN

Service Type: NON Target Population: 1.1

8/31/2018 IMS: Expiration Date: No

Program Name: CHEMICAL DEPENDENCY INTENSIVE OUTPATIENT PROGRAM

Legal Name: THOMAS J. ANDREWS, M.D., INC. Address: 2885 CHURN CREEK ROAD, SUITE A

City, State Zip: REDDING, CA 96002

(530) 221-7474 Phone: Fax: (530) 226-6329

Record ID: 450011AP

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: ANDERSON OUTPATIENT PROGRAM

Legal Name: RIGHT ROAD RECOVERY PROGRAMS, INC.

Address: 2110 FERRY STREET City, State Zip: ANDERSON, CA 96007 Phone: (530) 365-8523

Record ID: 450012AN Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

VOTC, INC. RESIDENTIAL TREATMENT PROGRAM Program Name:

Legal Name: VOTC, INC.

3640, 3642, 3644, 3646, 3650, 3652 EL PORTAL DRIVE AND 3647 RICARDO AVENUE Address:

City, State Zip: REDDING, CA 96002

Phone: (530) 722-1114 Fax: (530) 722-1115

450020AN Record ID:

Service Type: RES Resident Capacity: 24 Total Occupancy: 36 Target Population: 1.3

9/30/2018 IMS: Expiration Date: No

VOTC, INC. Program Name: Legal Name: VOTC, INC.

Address: 3617 RICARDO AVENUE

SUITE #1 & 9

City, State Zip: REDDING, CA 96002

(530) 722-1114 Fax: (530) 722-1115 Phone:

Record ID: 450020BN kecord ID:
Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: VISIONS OF THE CROSS
Legal Name: VOTC, INC.
3617 RICARDO AVENUE, #6, 7 & 8

(530) 722-1114 Phone: Fax: (530) 722-1115

Record ID: 450020DN

Record ID: 4500 Service Type: RES Resident Capacity: 10 Total Occupancy: 16
Target Population: 1.4

11/30/2019 IMS: Expiration Date: No

As of 11/1/2017

Sierra County

Program Name:SIERRA COUNTY HUMAN SERVICESLegal Name:SIERRA COUNTY HUMAN SERVICESAddress:704 MILL STREET

City, State Zip: LOYALTON, CA 96118

Phone: (530) 993-6748 Fax: (530) 993-6759

Record ID: 460001AN

Service Type: NON Target Population: 1.1
Expiration Date: 5/31/2019

IMS: No

As of 11/1/2017

Siskiyou County

SISKIYOU COUNTY BEHAVIORAL HEALTH

SISKIYOU COUNTY HEALTH & HUMAN SERVICES AGENCY

Program Name: Legal Name: Address: 2060 CAMPUS DRIVE City, State Zip: YREKA, CA 96097-9538

(530) 841-4890 Fax: (530) 841-4881 Phone:

Record ID: 470002AN

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: KARUK HEALTH CLINIC
Legal Name: KARUK TRIBE
Address: 1515 SOUTH OREGON ST Address: 1515 SOUTH OREGON STREET
City, State Zip: YREKA, CA 96097
Phone:

Phone: (530) 842-9200 Fax: (530) 841-5150

Record ID: 470003AN

Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

As of 11/1/2017

Solano County

Program Name: SOUTHERN SOLANO ALCOHOL COUNCIL

Legal Name: BI-BETT

Address: 419 PENNSYLVANIA STREET

City, State Zip: VALLEJO, CA 94590

Phone: (707) 643-2715 Fax: (707) 643-8536

Record ID: 480002BN

Service Type: RES-DETOX

Resident Capacity: 9
Total Occupancy: 9
Target Population: 1.1

Expiration Date: 12/31/2019 IMS: No

Program Name: SHAMIA RECOVERY CENTER

Legal Name: BI-BETT

Address: 126, 126-1/2, AND 128 OHIO STREET

City, State Zip: VALLEJO, CA 94590

Phone: (707) 644-2577 Fax: (707) 644-2577

Record ID: 480002CN

Service Type: RES Resident Capacity: 16 Total Occupancy: 16 Target Population: 1.1

Expiration Date: 11/30/2019 IMS: No

Program Name: RECOVERY CONNECTION

Legal Name: BI-BETT

Address: 604 BROADWAY STREET City, State Zip: VALLEJO, CA 94590

Phone: (707) 643-2748 Fax: (707) 558-8047

Record ID: 480002GN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: GENESIS HOUSE
Legal Name: GENESIS HOUSE, INC.
Address: 1149 WARREN AVENUE
City, State Zip: VALLEJO, CA 94591
Phone: (707) 552-5295

Phone: (707) 55%
Record ID: 480005AN
Service Type: RES
Resident Capacity: 19

Total Occupancy: 19
Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: GENESIS HOUSE II
Legal Name: GENESIS HOUSE, INC.
Address: 133 RENIDA STREET
City, State Zip: VALLEJO, CA 94591
Phone: (707) 552-5295

Record ID: 480005BN
Service Type: RES
Resident Capacity: 12

Total Occupancy: 12
Target Population: 1.2

Expiration Date: 6/30/2019 IMS: No

Program Name: THE HOUSE OF ACTS/SUBSTANCE ABUSE PROGRAM
Legal Name: THE HOUSE OF ACTS/SUBSTANCE ABUSE PROGRAM

Address: 627 GRANT STREET

City, State Zip: VALLEJO, CA 94590-7228 Phone: (707) 553-1042 Fax: (707) 553-8146

Record ID: 480010AN

Service Type: RES Resident Capacity: 10 Total Occupancy: 10 Target Population: 1.2

Expiration Date: 2/28/2019 IMS: No

Program Name: THE HOUSE OF ACTS II

Legal Name: THE HOUSE OF ACTS/SUBSTANCE ABUSE PROGRAM

Address: 115 TERI COURT City, State Zip: VALLEJO, CA 94589

Phone: (707) 552-3462 Fax: (707) 553-8146

Record ID: 480010BN

Service Type: RES
Resident Capacity: 10
Total Occupancy: 10
Target Population: 1.2

Expiration Date: 6/30/2018 IMS: No

Program Name: THE HOUSE OF ACTS ALCOHOL & SUBSTANCE ABUSE TREATMENT PROGRAM

Legal Name: THE HOUSE OF ACTS/SUBSTANCE ABUSE PROGRAM

Address: 844 5TH STREET City, State Zip: VALLEJO, CA 94589

Phone: (707) 552-2071 Fax: (707) 553-8146

Record ID: 480010DN

Service Type: RES
Resident Capacity: 8
Total Occupancy: 8
Target Population: 1.3

Expiration Date: 8/31/2018 IMS: No

Program Name: ARCHWAY RECOVERY SERVICES, INC. Legal Name: ARCHWAY RECOVERY SERVICES, INC.

Address: 1525 UNION AVENUE City, State Zip: FAIRFIELD, CA 94533

Phone: (707) 435-1804 Fax: (707) 435-9807

Record ID: 480022AN
Service Type: RES-DETOX

Resident Capacity: 13 Total Occupancy: 13 Target Population: 1.2

Expiration Date: 3/31/2019 IMS: No

Program Name: ANKA BEHAVIORAL HEALTH, INC.

Legal Name: ANKA BEHAVIORAL HEALTH, INCORPORATED

Address: 251 GEORGIA STREET City, State Zip: VALLEJO, CA 94590

Phone: (707) 558-8195 Fax: (707) 558-8196

Record ID: 480023AN

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: A WISE RETREAT

Legal Name: JBLOCKSHIN & ASSOCIATES LLC,

Address: 4749 GEORGIA ST City, State Zip: VALLEJO, CA 94591 Phone: (707) 712-7733

Record ID: 480035AP
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 10/31/2018 IMS: No

As of 11/1/2017

Sonoma County

Program Name: CAMPOBELLO CHEMICAL DEPENDENCY RECOVERY CENTER

Legal Name: CAMPOBELLO CHEMICAL DEPENDENCY RECOVERY CENTER, INC.

Address: 3250 GUERNEVILLE ROAD City, State Zip: SANTA ROSA, CA 95401

Phone: (707) 579-4066 Fax: (707) 579-1603

Record ID: 490002AP
Service Type: RES-DETOX

Resident Capacity: 25 Total Occupancy: 25 Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: WOMEN'S RECOVERY SERVICES, A UNIQUE PLACE
Legal Name: WOMEN'S RECOVERY SERVICES, A UNIQUE PLACE
Address: 98, 112, 122, AND 140 HENDLEY STREET

City, State Zip: SANTA ROSA, CA 95404

Phone: (707) 527-0412 Fax: (707) 527-6048

Record ID: 490004EN

Service Type: RES Resident Capacity: 20 Total Occupancy: 32 Target Population: 1.4

Expiration Date: 2/28/2018 IMS: No

Program Name:OUTPATIENT TREATMENT PROGRAMLegal Name:DRUG ABUSE ALTERNATIVES CENTERAddress:2403 PROFESSIONAL DRIVE, SUITE 101

City, State Zip: SANTA ROSA, CA 95403

Phone: (707) 571-2233 Fax: (707) 571-2238

Record ID: 490009BN

Service Type: NON Target Population: 1.1

Expiration Date: 12/31/2019 IMS: No

Program Name: PERINATAL DAY TREATMENT

Legal Name: DRUG ABUSE ALTERNATIVES CENTER
Address: 2400 COUNTY CENTER DRIVE SUITE B

City, State Zip: SANTA ROSA, CA 95403

Phone: (707) 566-0170 Fax: (707) 526-3155

Record ID: 490009EN
Service Type: NON
Target Population: 1.4

Expiration Date: 4/30/2018 IMS: No

Program Name: DRUG ABUSE ALTERNATIVES CENTER - DRUG COURT

Legal Name: DRUG ABUSE ALTERNATIVES CENTER
Address: 2400 COUNTY CENTER DRIVE, SUITE B

City, State Zip: SANTA ROSA, CA 95403

Phone: (707) 566-0170 Fax: (707) 568-5445

Record ID: 490009LN
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: TURNING POINT - ARROWOOD

Legal Name: DRUG ABUSE ALTERNATIVES CENTER

Address: 440 ARROWOOD DRIVE City, State Zip: SANTA ROSA, CA 95407

Phone: (707) 571-2233 Fax: (707) 284-2955

Record ID: 490009RN

Service Type: RES Resident Capacity: 112 Total Occupancy: 112 Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

Program Name: TURNING POINT ORENDA DETOX

Legal Name: DRUG ABUSE ALTERNATIVES CENTER

Address: 1430 NEOTOMAS AVENUE City, State Zip: SANTA ROSA, CA 95405

Phone: (707) 565-7460 Fax: (707) 565-7488

Record ID: 490009SN
Service Type: RES-DETOX

Resident Capacity: 30 Total Occupancy: 30 Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name: ATHENA HOUSE

Legal Name: CALIFORNIA HUMAN DEVELOPMENT CORPORATION

Address: 3555 SONOMA HIGHWAY City, State Zip: SANTA ROSA, CA 95409

Phone: (707) 526-3150 Fax: (707) 526-3250

Record ID: 490010AN

Service Type: RES
Resident Capacity: 40
Total Occupancy: 44
Target Population: 1.3

Expiration Date: 6/30/2019 IMS: No

Program Name: CALIFORNIA HUMAN DEVELOPMENT CORPORATION

EARLY INTERVENTION AND OUT-PATIENT TREA

Legal Name: CALIFORNIA HUMAN DEVELOPMENT CORPORATION

Address: 3315 AIRWAY DRIVE
City, State Zip: SANTA ROSA, CA 95403
Phone: (707) 523-2242

Record ID: (707) 523-

Service Type: NON

Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: AZURE ACRES

Legal Name: THE CAMP RECOVERY CENTER, LLC

Address: 2264 GREEN HILL ROAD City, State Zip: SEBASTOPOL, CA 95472

Phone: (707) 823-5019 Fax: (707) 823-7519

Record ID: 490021AP

Service Type: RES
Resident Capacity: 28
Total Occupancy: 28
Target Population: 1.1

Expiration Date: 12/31/2019 IMS: No

Program Name: AZURE ACRES IOP

Legal Name: THE CAMP RECOVERY CENTER, LLC Address: 420 MENDOCINO AVENUE, SUITE 101

City, State Zip: SANTA ROSA, CA 95401

Phone: (707) 542-1706 Fax: (707) 823-7519

Record ID: 490021BP

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2020 IMS: No

Program Name: MOUNTAIN VISTA FARM
Legal Name: NEW VISTAS RECOVERY, INC.
Address: 3020 WARM SPRINGS ROAD
City, State Zip: GLEN ELLEN, CA 95442

Phone: (707) 996-6716 Fax: (707) 996-6647

Record ID: 490025AP
Service Type: RES-DETOX

Resident Capacity: 30 Total Occupancy: 31 Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: SONOMA COUNTY INDIAN HEALTH PROJECT/BEHAVIOR HEALTH

Legal Name: SONOMA COUNTY INDIAN HEALTH PROJECT, INC.

Address: 144 STONY POINT ROAD, 2ND FLOOR

City, State Zip: SANTA ROSA, CA 95401

Phone: (707) 521-4550 Fax: (707) 544-1092

Record ID: 490032AN
Service Type: NON
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: OLYMPIA HOUSE

Legal Name: SONOMA RECOVERY SERVICES, LLC

Address: 11207 VALLEY FORD ROAD City, State Zip: PETALUMA, CA 94952 Phone: (415) 795-7609

Record ID: 490036AP
Service Type: RES-DETOX

Resident Capacity: 32 Total Occupancy: 32 Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: MUIR WOOD ADOLESCENT & FAMILY SERVICES

Legal Name: MUIR WOOD, LLC
Address: 1733 SKILLMAN LANE
City, State Zip: PETALUMA, CA 94952

Phone: (310) 903-1155 Fax: (707) 555-5401

Record ID: 490038AP

Service Type: DSS Target Population: 1.5

Expiration Date: 8/31/2019 IMS: No

Program Name: SACRED SPACE HEALING AND RETREAT CENTERS

Legal Name: SACRED SPACE HEALING AND RETREAT CENTERS INTERNATIONAL

Address: 627 CHERRY CREEK ROAD City, State Zip: CLOVERDALE, CA 95425

Phone: (707) 894-0673 Fax: (800) 914-6360

Record ID: 490039AP
Service Type: RES-DETOX

Resident Capacity: 4
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: CHI RECOVERY

Legal Name: CHI RECOVERY, INC.

Address: 105 MORRIS STREET, SUITES 214,218, 222, 192, 196, 204 AND 200

City, State Zip: SEBASTOPOL, CA 95472

Phone: (707) 824-0222 Fax: (707) 824-0222

Record ID: 490040AP
Service Type: NON-DETOX

Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name:

Legal Name:

PURA VIDA RECOVERY SERVICES

Legal Name:

PURA VIDA RECOVERY SERVICES, LLC

Address:

130 STONY POINT ROAD, SUITE D

City, State Zip:

SANTA ROSA, CA 95401

(707) 338-5927

Record ID:

490041AP

Record ID: 490041AP Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

As of 11/1/2017

Stanislaus County

Program Name: STANISLAUS RECOVERY CENTER

Legal Name: STANISLAUS COUNTY BEHAVIORAL HEALTH AND RECOVERY SERVICES

Address: 1904 RICHLAND AVENUE,
ADULT TREATMENT BUILDING

City, State Zip: CERES, CA 95307

Phone: (209) 541-2121 Fax: (209) 541-2083

Record ID: 500002EN
Service Type: RES-DETOX

Resident Capacity: 44
Total Occupancy: 44
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: NEW HOPE RECOVERY

Legal Name: GENE RADINO

Address: 823 EAST ORANGEBURG AVENUE

City, State Zip: MODESTO, CA 95350

Phone: (209) 527-9797 Fax: (209) 527-9825

Record ID: 500004AP
Service Type: RES-DETOX

Resident Capacity: 40
Total Occupancy: 40
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: RECOVERY SYSTEMS ASSOCIATES

Legal Name: GENE RADINO

Address: 823 EAST ORANGEBURG AVENUE

City, State Zip: MODESTO, CA 95350

Phone: (209) 527-2046 Fax: (209) 527-9825

Record ID: 500004BP Service Type: NON

Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name:NIRVANA DRUG AND ALCOHOL TREATMENT INSTITUTELegal Name:NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM

Address: 1100 KANSAS AVENUE, SUITE B-C

City, State Zip: MODESTO, CA 95351

Phone: (209) 579-1151 Fax: (209) 579-9605

Record ID: 500009CN
Service Type: NON

Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2018 IMS: No

Program Name:NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAMLegal Name:NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM

Address: 1028 RENO AVENUE City, State Zip: MODESTO, CA 95351

Phone: (209) 579-1103 Fax: (209) 578-1085

Record ID: 500009EN
Service Type: RES-DETOX

Resident Capacity: 30
Total Occupancy: 30
Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name: NIRVANA DRUG AND ALCOHOL WOMEN OF HOPE
Legal Name: NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM

Address: 1116 & 1116 1/2 ALICE STREET &

130 NELLIE STREET

City, State Zip: MODESTO, CA 95350-5929

Phone: (209) 578-3132 Fax: (209) 578-3498

Record ID: 500009GN
Service Type: RES-DETOX

Resident Capacity: 16 Total Occupancy: 16 Target Population: 1.3

Expiration Date: 4/30/2018 IMS: No

Program Name: NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM Legal Name: NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM

Address: 1040 RENO AVENUE City, State Zip: MODESTO, CA 95351

Phone: (209) 579-1103 Fax: (209) 579-9605

Record ID: 500009IN

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.2

Expiration Date: 10/31/2019 IMS: No

Program Name: NIRVANA DRUG AND ALCOHOL TREATMENT INSTITUTE

Legal Name: NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM

Address: 1100 KANSAS AVENUE, SUITE D

City, State Zip: MODESTO, CA 95351

Phone: (209) 579-1151 Fax: (209) 579-9605

Record ID: 500009JN

Service Type: NON Target Population: 1.1

Expiration Date: 9/30/2019 IMS: No

Program Name: THE LAST RESORT

Legal Name: ADOLESCENCE'S LAST RESORT Address: 218 EAST ORANGEBURG AVENUE

City, State Zip: MODESTO, CA 95350

Phone: (209) 523-6900 Fax: (209) 523-6909

Record ID: 500010AN

Service Type: DSS Target Population: 1.5

Expiration Date: 2/28/2019 IMS: No

Program Name: THE LAST RESORT

Legal Name: ADOLESCENCE'S LAST RESORT
Address: 3125 MCHENRY AVENUE, SUITE D

City, State Zip: MODESTO, CA 95350

Phone: (209) 523-6910 Fax: (209) 523-6912

Record ID: 500010BN

Service Type: NON Target Population: 1.5

Expiration Date: 12/31/2018 IMS: No

Program Name: BREAKTHROUGHS OUTPATIENT TREATMENT

Legal Name: DOROTHY FRANKLIN

Address: 2125 WYLIE DRIVE, SUITE 3

City, State Zip: MODESTO, CA 95355

Phone: (209) 529-1855 Fax: (209) 529-1882

Record ID: 500024AP

Service Type: NON Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: ADDICTION FREE RECOVERY SERVICES

Legal Name: OPIE GROUP, INC.

Address: 2937 VENNEMEN AVENUE, SUITE A 105

City, State Zip: MODESTO, CA 95356

Phone: (209) 595-4987 Fax: (209) 579-3311

Record ID: 500027AP

Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2019 IMS: No

Program Name: ADDICTION FREE RECOVERY SERVICES
Legal Name: OPIE GROUP, INC.

Legal Name: OPIE GROUP, INC. Address: 5404 KIERNAN AVENUE City, State Zip: SALIDA, CA 95368

Phone: (209) 579-3301 Fax: (209) 579-3311

Record ID: 500027BP Service Type: RES-DETOX

Resident Capacity: 15
Total Occupancy: 15
Target Population: 1.1

Expiration Date: 1/31/2018 IMS: No

Program Name: MARTIN'S AGAPE OUTPATIENT PROGRAM

Legal Name:
Address:
City, State Zip:
Phone:
C209) 566-8626

Record ID:
PAULA JEAN MARTIN
CERES, CA 95307
(209) 566-8626

500028AP

Record ID: 5000 Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2019 IMS:

As of 11/1/2017

Sutter County

OPTIONS FOR CHANGE SUBSTANCE ABUSE PROGRAM

SUTTER-YUBA BEHAVIORAL HEALTH

Program Name: Legal Name: Address: 1965 LIVE OAK BOULEVARD City, State Zip: YUBA CITY, CA 95991-8828

Phone: (530) 822-7200 Fax: (530) 822-7108

Record ID: 510002BN

Service Type: NON Target Population: 1.1

6/30/2019 IMS: Expiration Date: No

Program Name:FIRST STEPS PERINATAL DAY TREATMENT PROGRAMLegal Name:SUTTER-YUBA BEHAVIORAL HEALTHAddress:1251 EAST ONSTOTT ROAD Address: 1251 EAST ONSTOTT ROAD
City, State Zip: YUBA CITY, CA 95991-2439

Phone: (530) 822-7263 Fax: (530) 822-7267

Record ID: 510002CN

Service Type: NON Target Population: 1.1

Expiration Date: 11/30/2018 IMS: No

Program Name:FEATHER RIVER MEN'S CENTERLegal Name:FEATHER RIVER MEN'S CENTERAddress:2465 BIRCH STREET

City, State Zip: LIVE OAK, CA 95953-2609

Phone: (530) 695-8006

Record ID: 510006AN Service Type: RES Resident Capacity: 12 Total Occupancy: Target Population: 1.2

IMS: Expiration Date: 11/30/2017 No

As of 11/1/2017

Tehama County

Program Name: Legal Name: Address: TEHAMA COUNTY HEALTH SERVICES AGENCY DRUG AND ALCOHOL DIVISION

TEHAMA COUNTY HEALTH SERVICES AGENCY

Address: 1850 WALNUT STREET, BUILDING G
City, State Zip: RED BLUFF, CA 96080

Phone: (530) 527-7893 Fax: (530) 527-0766

Record ID: 520002AN

Service Type: NON

Target Population: 1.1

4/30/2019 IMS: Expiration Date: No

Program Name: TEHAMA COUNTY HEALTH SERVICES AGENCY DRUG AND ALCOHOL DIVISION -

SOUTH COUNTY

Legal Name: TEHAMA COUNTY HEALTH SERVICES AGENCY Address: 275 SOLANO STREET

City, State Zip: CORNING, CA 96021

Phone: (530) 824-4890 Fax: (530) 824-8443

Record ID: 520002BN Service Type: NON

Target Population: 1.1

Expiration Date: 5/31/2019 IMS: No

As of 11/1/2017

Trinity County

Program Name: TRINITY COUNTY ALCOHOL AND OTHER DRUG SERVICES
Legal Name: TRINITY COUNTY ALCOHOL AND OTHER DRUG SERVICES
Address: 1450 MAIN STREET

Address: 1450 MAIN STREET
City, State Zip: WEAVERVILLE, CA 96093

Phone: (530) 623-1362 Fax: (530) 623-4448

Record ID: 530001AN

Service Type: No.

Target Population: 1.1

Temiration Date: 2/28/2019 IMS: No

As of 11/1/2017

Tulare County

Program Name: PAAR CENTER WEST

Legal Name: PORTERVILLE HALFWAY HOUSE Address: 182 WEST BELLEVIEW AVENUE City, State Zip: PORTERVILLE, CA 93257

Phone: (559) 781-0107

Record ID: 540001CN
Service Type: RES
Resident Capacity: 12
Total Occupancy: 14
Target Population: 1.3

Expiration Date: 7/31/2019 IMS: No

Program Name: THE PAAR CENTER

Legal Name: PORTERVILLE HALFWAY HOUSE
Address: 509 NORTH EL GRANITO STREET

City, State Zip: PORTERVILLE, CA 93257

Phone: (559) 781-0107 Fax: (559) 781-7521

Record ID: 540001FN

Service Type: NON Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: THE PAAR CENTER

Legal Name: PORTERVILLE HALFWAY HOUSE

Address: 218, 232 AND 237 W. BELLEVIEW AVENUE; 509 N. EL GRANITO

City, State Zip: PORTERVILLE, CA 93257

Phone: (559) 781-0107 Fax: (559) 781-7521

Record ID: 540001HN
Service Type: RES-DETOX

Resident Capacity: 45 Total Occupancy: 48 Target Population: 1.2

Expiration Date: 11/30/2018 IMS: No

Program Name: TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY - FAMILY CARE DIVISION

Legal Name: TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY

Address: 942 S. SANTA FE STREET City, State Zip: VISALIA, CA 93292

Phone: (559) 636-4000 Fax: (559) 624-1067

Record ID: 540002HN
Service Type: NON
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY - FAMILY CARE DIVISION

Legal Name: TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY

Address: 1055 WEST HENDERSON AVENUE, SUITE 2

City, State Zip: PORTERVILLE, CA 93257

Phone: (559) 788-1200 Fax: (559) 624-1067

Record ID: 540002IN
Service Type: NON
Target Population: 1.1

Expiration Date: 2/28/2019 IMS: No

Program Name: TURNING POINT YOUTH SERVICES

Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC.

Address: 220 NORTH LOCUST STREET

City, State Zip: VISALIA, CA 93291

Phone: (559) 627-1385 Fax: (559) 636-2105

Record ID: 540005BN
Service Type: NON
Target Population: 1.5

Expiration Date: 6/30/2019 IMS: No

Program Name: TURNING POINT VISALIA RE-ENTRY CENTER

Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC. Address: 1845 SOUTH COURT STREET,

DORMS 1, 2, 3, 4, 5 AND 6

City, State Zip: VISALIA, CA 93277

Phone: (559) 732-5550 Fax: (559) 732-5574

Record ID: 540005DN
Service Type: RES

Resident Capacity: 32 Total Occupancy: 32 Target Population: 1.2

Expiration Date: 3/31/2018 IMS: No

Program Name: COURAGE TO CHANGE, INC.

Legal Name: COURAGE TO CHANGE
Address: 1230 N. ANDERSON ROAD
City, State Zip: EXETER, CA 93221

Phone: (559) 594-4855 Fax: (559) 594-0086

Record ID: 540014BN

Service Type: NON

Target Population: 1.5

Expiration Date: 7/31/2019 IMS: No

Program Name: RECOVERY RESOURCES

Legal Name: RICK AND JERRI THOMPSON, D.B.A., RECOVERY RESOURCES

Address: 4040 S. DEMAREE ROAD, SUITE A

City, State Zip: VISALIA, CA 93277

Phone: (559) 625-8176 Fax: (559) 625-8179

Record ID: 540020AP Service Type: NON

Service Type: NON Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: ALTERNATIVE SERVICES

Legal Name: ALTERNATIVE SERVICES, INC.

Address: 215 NORTH D STREET City, State Zip: PORTERVILLE, CA 93257

Phone: (559) 783-2402 Fax: (559) 782-4681

Record ID: 540024AP

Service Type: NON Target Population: 1.5

Expiration Date: 2/28/2018 IMS: No

Program Name: ALTERNATIVE SERVICES

Legal Name: ALTERNATIVE SERVICES, INC. Address: 2380 W. WHITENDALE AVENUE

City, State Zip: VISALIA, CA 93227

Phone: (559) 651-8090 Fax: (559) 651-8099

Record ID: 540024DP

Service Type: NON Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: ALTERNATIVE SERVICES

Legal Name: ALTERNATIVE SERVICES, INC.

Address: 125 SOUTH M STREET City, State Zip: TULARE, CA 93274 Phone: (559) 685-8283

Record ID: 540024EP
Service Type: NON
Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No

Program Name: SRS RECOVERY SERVICES
Legal Name: SRS RECOVERY SERVICES, LLC
Address: 250 NORTH MAIN STREET
City, State Zip: PORTERVILLE, CA 93257

Phone: (559) 789-9881 Fax: (559) 789-9877

Record ID: 540028BP
Service Type: NON
Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: NEW HOPE

Legal Name: CENTRAL VALLEY RECOVERY SERVICES, INC.

Address: 212 NORTH STEVENSON STREET

City, State Zip: VISALIA, CA 93291

Phone: (559) 625-2995 Fax: (559) 625-3808

Record ID: 540031AN
Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.3

Expiration Date: 6/30/2018 IMS: No

Program Name: PINE RECOVERY CENTER

Legal Name: CENTRAL VALLEY RECOVERY SERVICES, INC.

Address: 120 WEST SCHOOL AVENUE

City, State Zip: VISALIA, CA 93291

Phone: (559) 625-4100 Fax: (559) 625-3808

Record ID: 540031BN
Service Type: RES-DETOX
Resident Capacity: 27

Resident Capacity: 27 Total Occupancy: 27 Target Population: 1.2

Expiration Date: 8/31/2019 IMS: No

Program Name: NEW VISIONS FOR WOMEN

Legal Name: CENTRAL VALLEY RECOVERY SERVICES, INC.

Address: 1425-A and B EAST WALNUT AVENUE

City, State Zip: VISALIA, CA 93277-6432

Phone: (559) 625-4072 Fax: (559) 625-3808

Record ID: 540031CN
Service Type: RES-DETOX

Resident Capacity: 23 Total Occupancy: 23 Target Population: 1.3

Expiration Date: 5/31/2018 IMS: No

Program Name: MOTHERING HEIGHTS

Legal Name: CENTRAL VALLEY RECOVERY SERVICES, INC.

Address: 705 SOUTH COURT STREET

City, State Zip: VISALIA, CA 93277

Phone: (559) 625-2995 Fax: (559) 625-3808

Record ID: 540031DN

Service Type: RES
Resident Capacity: 10
Total Occupancy: 23
Target Population: 1.4

Expiration Date: 10/31/2017 IMS: No

Program Name: NEW HEIGHTS

Legal Name: CENTRAL VALLEY RECOVERY SERVICES, INC.

Address: 1731 W. WALNUT AVENUE

City, State Zip: VISALIA, CA 93277

(559) 732-4885 Fax: (559) 625-3808 Phone:

Record ID: 540031EN NON Service Type: Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

ROBERTSON RECOVERY Program Name:

Legal Name: CENTRAL VALLEY RECOVERY SERVICES, INC.

Address: 3107 EAST KAWEAH AVENUE

City, State Zip: VISALIA, CA 93292

(559) 754-2705 Fax: (559) 802-3097 Phone:

Record ID: 540031GN Service Type: RES-DETOX

Resident Capacity: 28 29 Total Occupancy: Target Population: 1.2

Expiration Date: 8/31/2018 IMS: No

ASTON'S NEW HOPE RECOVERY Program Name: Legal Name: ASTON'S NEW HOPE RECOVERY Address: 2415 N. OAK GROVE COURT

City, State Zip: VISALIA, CA 93291

(559) 799-7156 Fax: (559) 636-1324 Phone:

Record ID: 540037AP

Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

As of 11/1/2017

Tuolumne County

Program Name: THE RANCH

Legal Name: MAYNORD'S CHEMICAL DEPENDENCY RECOVERY CENTER

Address: 19320 CHEROKEE ROAD

City, State Zip: TUOLUMNE, CA 95379

Phone: (209) 928-3737 Fax: (209) 928-1152

Record ID: 550001AP Service Type: RES-DETOX

Resident Capacity: 36 Total Occupancy: 37 Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

As of 11/1/2017

Ventura County

Program Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT

ALCOHOL & DRUG PROGRAM-SIMI VALLEY C

VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL AND DRUG PROGRAMS Legal Name:

No

Address: 3150 EAST LOS ANGELES AVENUE

City, State Zip: SIMI VALLEY, CA 93063

Phone: (805) 577-1724

Record ID: 560003AN Service Type: NON Target Population: 1.1

Expiration Date: 11/30/2019 IMS:

Program Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT

ALCOHOL & DRUG PROGRAM-VENTURA CTR

VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL & DRUG PROGRAMS Legal Name:

Address: 24 EAST MAIN STREET City, State Zip: VENTURA, CA 93001

Phone: (805) 652-6919 (805) 652-0868 Fax:

Record ID: 560003BN

Service Type: NON Target Population: 1.1

11/30/2017 IMS: Expiration Date: No

Program Name: OXNARD CENTER

Legal Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL & DRUG PROGRAMS

Address: 1911 WILLIAMS DRIVE City, State Zip: OXNARD, CA 93036 (805) 981-9200 Phone:

Record ID: 560003CN Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2018 IMS: No

Program Name: A NEW START FOR MOMS

Legal Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL & DRUG PROGRAMS

Address: 1911 WILLIAMS DRIVE, SUITE 140

OXNARD, CA 93036 City, State Zip: Phone: (805) 981-9250 560003DN

Record ID: Service Type: NON Target Population: 1.3

Expiration Date: 10/31/2018 IMS: No

Program Name: FILLMORE ADP CENTER

Legal Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL & DRUG PROGRAMS

Address: 828 WEST VENTURA STREET, SUITE 250

City, State Zip: FILLMORE, CA 93015 Phone: (805) 524-8644

560003GN Record ID: Service Type: NON Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: KHEPERA HOUSE Legal Name: KHEPERA HOUSE

Address: 108 WEST HARRISON AVENUE

City, State Zip: VENTURA, CA 93001 Phone: (805) 653-2596

Record ID: 560004DN Service Type: RES Resident Capacity: 6 Total Occupancy: 6

Target Population: 1.2

Expiration Date: 9/30/2018 IMS: No Program Name: KHEPERA HOUSE Legal Name: KHEPERA HOUSE

Address: 277 A AND B WEST HARRISON AVENUE

City, State Zip: VENTURA, CA 93001 Phone: (805) 648-9762

Record ID: 560004EN Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.2

Expiration Date: 9/30/2018 IMS: No

Program Name: KHEPERA HOUSE Legal Name: KHEPERA HOUSE

125-A, 125-B, 125-C & 125-D WEST HARRISON STREET Address:

City, State Zip: VENTURA, CA 93001

Phone: (805) 653-2596 Fax: (805) 648-9762

Record ID: 560004JN

Service Type: RES Resident Capacity: Total Occupancy: 24 Target Population: 1.2

Expiration Date: 5/31/2019 TMS: No

ACTION FAMILY COUNSELING CENTERS - SIMI VALLEY Program Name:

ACTION FAMILY COUNSELING, INC. Legal Name:

Address: 4380 APRICOT ROAD City, State Zip: SIMI VALLEY, CA 93063

Phone: (805) 584-3258 Fax: (661) 297-9701

Record ID: 560026AP Service Type: NON

Target Population: 1.5

Expiration Date: 11/30/2018 IMS: No

ACTION FAMILY COUNSELING, INC. ADULT RESIDENTIAL TREATMENT - PIRU Program Name:

Legal Name: ACTION FAMILY COUNSELING, INC.

Address: 691 MAIN STREET City, State Zip: PIRU, CA 93040

Phone: (805) 521-1250 Fax: (850) 521-1425

Record ID: 560026DP Service Type: RES

Resident Capacity: 22 Total Occupancy: 22 Target Population: 1.1

9/30/2018 Expiration Date: TMS: Nο

INTERVENTION INSTITUTE Program Name:

Legal Name: LAURIE SANDERS

Address: 973 S. WESTLAKE BLVD, SUITE 103

City, State Zip: THOUSAND OAKS, CA 91361

(805) 379-3611 (805) 446-4470 Phone: Fax:

Record ID: 560027AP

Service Type: NON Target Population: 1.1

Expiration Date: 6/30/2019 IMS: No

Program Name: ALTERNATIVE ACTION PROGRAMS

Legal Name: DENNIS M. GIROUX & ASSOCIATES, INC.

Address: 314 WEST FOURTH STREET

City, State Zip: OXNARD, CA 93030

(805) 988-1112 (805) 988-4883 Phone: Fax:

Record ID: 560028AP

Service Type: NON Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No Program Name:GENESIS PROGRAMS, INC.Legal Name:GENESIS PROGRAMS, INC.Address:1732 PALMA DRIVE, SUITE 208

City, State Zip: VENTURA, CA 93003

Phone: (805) 650-3094 Fax: (805) 650-3097

Record ID: 560032AP
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: GENESIS PROGRAMS, INC.
Legal Name: GENESIS PROGRAMS, INC.

Address: 145 HODENCAMP ROAD, SUITE 207

City, State Zip: THOUSAND OAKS, CA 91360

Phone: (805) 497-6169 Fax: (805) 650-3097

Record ID: 560032BP
Service Type: NON
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

Program Name: PASSAGES VENTURA

Legal Name: PASSAGES SILVER STRAND LLC
Address: 224 EAST CLARA STREET
City, State Zip: PORT HUENEME, CA 93041

Phone: (805) 283-4737 Fax: (805) 488-0001

Record ID: 560036AP
Service Type: RES-DETOX
Resident Capacity: 90

Resident Capacity: 90
Total Occupancy: 90
Target Population: 1.1

Expiration Date: 3/31/2019 IMS: No

Program Name: PASSAGES VENTURA

Legal Name: PASSAGES SILVER STRAND LLC

Address: 241 MARKET STREET
City, State Zip: PORT HUENEME, CA 93041

Phone: (805) 283-4737 Fax: (805) 488-9000

Record ID: 560036BP

Service Type: NON Target Population: 1.1

Expiration Date: 10/31/2017 IMS: No

Program Name: LA VENTANA TREATMENT PROGRAMS

Legal Name: RYLIST, INC.

Address: 1408 E THOUSAND OAKS BOULEVARD, SUITE 100

City, State Zip: THOUSAND OAKS, CA 91362

Phone: (805) 644-5745 Fax: (818) 975-5076

Record ID: 560038BP

Service Type: NON Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: LA VENTANA TREATMENT PROGRAMS

Legal Name: RYLIST, INC

Address: 385 N. CONEJO SCHOOL ROAD City, State Zip: THOUSAND OAKS, CA 91362

Phone: (805) 379-0565

Record ID: 560038DP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: LA VENTANA TREATMENT PROGRAMS

Legal Name: RYLIST, INC.

Address: 395 N. CONEJO SCHOOL ROAD City, State Zip: THOUSAND OAKS, CA 91362

Phone: (805) 659-2309 Fax: (818) 975-5076

Record ID: 560038FP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2018 IMS: No

Program Name: LA VENTANA TREATMENT PROGRAMS

Legal Name: RYLIST, INC

Address: 1154 CARDIFF CIRCLE City, State Zip: THOUSAND OAKS, CA 91362

Phone: (805) 379-4883

Record ID: 560038GP
Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 4/30/2019 IMS: No

Program Name: LA VENTANA TREATMENT PROGRAMS

Legal Name: RYLIST, INC.

Address: 1771 COUNTRY OAKS LANE City, State Zip: THOUSAND OAKS, CA 91362

Phone: (805) 370-5440 Fax: (805) 371-4038

Record ID: 560038HP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: PSYCHOLOGICAL SERVICES FOR FAMILIES
Legal Name: PSYCHOLOGICAL SERVICES FOR FAMILIES

Address: 410 NORTH A STREET City, State Zip: OXNARD, CA 93030

Phone: (805) 701-1040 Fax: (805) 487-2255

Record ID: 560039AP

Service Type: NON

Target Population: 1.1

Expiration Date: 8/31/2017 IMS: No

Program Name: A WILDWOOD RECOVERY
Legal Name: A WILDWOOD RECOVERY
Address: 360 CAMINO DE CELESTE
City, State Zip: THOUSAND OAKS, CA 91360

Phone: (805) 493-5741 Fax: (805) 493-5047

Record ID: 560040AP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: A WILDWOOD RECOVERY IOP

Legal Name: A WILDWOOD RECOVERY

Address: 166 N. MOORPARK ROAD, SUITE 304

City, State Zip: THOUSAND OAKS, CA 91360

Phone: (805) 493-5741 Fax: (805) 493-5047

Record ID: 560040BP

Service Type: NON Target Population: 1.1

Expiration Date: 11/30/2017 IMS: No

Program Name: COMMUNITY RECOVERY CENTER Legal Name: VENTURA RECOVERY CENTER, INC.

166 SIESTA AVENUE Address:

City, State Zip: THOUSAND OAKS, CA 91360

Phone: (805) 499-8383 Fax: (805) 494-4898

Record ID: 560041AP RES-DETOX Service Type:

Resident Capacity: 10 Total Occupancy: 10 Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: THE LAKE HOUSE

Legal Name: SHERWOOD CORPORATE HOUSING LLC

Address: 890 LAKE SHERWOOD DRIVE City, State Zip: LAKE SHERWOOD, CA 91361

Phone: (805) 371-8870

Record ID: 560042AP Service Type: RES Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 10/31/2017 TMS: Nο

Program Name: ENGAGE RECOVERY, INC. Legal Name: ENGAGE RECOVERY, INC.

Address: 650 HAMPSHIRE ROAD SUITES 104, 204, 212

City, State Zip: WESTLAKE VILLAGE, CA 91361

Phone: (805) 497-0605 Fax: (805) 371-4862

Record ID: 560043AP Service Type: NON Target Population: 1.5

4/30/2018 IMS: Expiration Date: No

Program Name: VANTAGE POINT RECOVERY Legal Name: GATE OF RECOVERY INC. 123 HODENCAMP ROAD, Address:

SUITES 100, 103, 107, 205 & 210

THOUSAND OAKS, CA 91360 City, State Zip:

(805) 777-7595 Phone: Fax: (805) 777-9249

Record ID: 560045AP Service Type: NON

Target Population: 1.1

Expiration Date: 3/31/2018 IMS: No

PCI - WESTLAKE CENTERS - IOP Program Name:

MIRIAM HAMIDEH, PH.D, CLINICAL PSYCHOLOGIST, INC Legal Name:

Address: 5743 CORSA AVENUE, SUITE 223 WESTLAKE VILLAGE, CA 91362 City, State Zip:

(747) 222-7464 Phone:

Record ID: 560046AP Service Type: NON

Target Population: 1.1

1/31/2019 Expiration Date: IMS: No

DESTINATIONS TO RECOVERY Program Name: DESTINATIONS TO RECOVERY, LLC Legal Name:

Address: 1304 E. MAIN STREET City, State Zip: VENTURA, CA 93001

Phone: (818) 737-2221 (805) 256-3287 Fax:

Record ID: 560047AP Service Type: NON

Target Population: 1.13

Expiration Date: 6/30/2019 IMS: No Program Name: NARCONON OJAI

Legal Name: NARCONON PACIFIC COAST 9950 SULPHUR MOUNTAIN ROAD Address:

City, State Zip: OJAI, CA 93023 (805) 798-8021 Phone: Record ID: 560048AN Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 8 Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: PURE RECOVERY

Legal Name: PURE RECOVERY CALIFORNIA, INC.

Address: 5427 REEF WAY City, State Zip: OXNARD, CA 93035 Phone: (805) 263-6296

Record ID: 560049AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: PURE RECOVERY

Legal Name: PURE RECOVERY CALIFORNIA, INC. Address: 4310 TRADEWINDS DRIVE, SUITE 300

City, State Zip: OXNARD, CA 93035 Phone: (805) 263-6296

Record ID: 560049BP Service Type: NON Target Population: 1.1

10/31/2018 IMS: Expiration Date: No

Program Name: PURE RECOVERY

Legal Name: PURE RECOVERY CALIFORNIA, INC.

Address: 3957 W. HEMLOCK STREET

City, State Zip: OXNARD, CA 93035 Phone: (805) 263-6296 Record ID: 560049CP

Service Type: RES-DETOX Resident Capacity: 6

Total Occupancy: 6 Target Population: 1.1

Expiration Date: 2/28/2019 TMS: No

Program Name: TRIBE INTEGRATIVE RECOVERY

Legal Name: NITOR, INC.

1317 DEL NORTE ROAD, SUITE 200 Address:

City, State Zip: CAMARILLO, CA 93010

(844) 687-8742 Fax: (805) 832-6786 Phone:

Record ID: 560050AP

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2020 IMS: No

Program Name: "SET FREE" DRUG & ALCOHOL TREATMENT CENTERS OF AMERICA

Legal Name: "SET FREE" DRUG & ALCOHOL TREATMENT CENTERS OF AMERICA

3069 CISCO COURT Address: City, State Zip: SIMI VALLEY, CA 93063

(805) 404-9390 Phone:

Record ID: 560051AP Service Type: RES-DETOX

Resident Capacity: 6 Total Occupancy: 6 Target Population: 1.1

Expiration Date: 5/31/2018 IMS: No Program Name: CHANGING TIDES TREATMENT CENTER
Legal Name: CHANGING TIDES TREATMENT, LLC

Address: 117 SANTA CRUZ AVENUE City, State Zip: 0XNARD, CA 93035

Phone: (805) 254-0619 **Record ID: 560052AP**Service Type: RES-DETOX

Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: CHANGING TIDES TREATMENT CENTER
Legal Name: CHANGING TIDES TREATMENT, LLC

Address: 2021 SPERRY AVENUE,

18

City, State Zip: VENTURA, CA 93003 Phone: (844) 883-3869

Record ID: 560052BP
Service Type: NON
Target Population: 1.1

Expiration Date: 8/31/2018 IMS: No

Program Name: VENTURA RECOVERY CENTER

Legal Name: SIESTA HOUSE, LLC

Address: 2985 E. HILLCREST DRIVE,

105 &106

City, State Zip: THOUSAND OAKS, CA 91362

Phone: (800) 247-6111

Record ID: 560053AP
Service Type: NON
Target Population: 1.1

Expiration Date: 9/30/2018 IMS: No

Program Name: PROTOTYPES WOMEN'S CENTER-VENTURA

Legal Name: HEALTHRIGHT 360

Address: 2150 N VICTORIA AVENUE

City, State Zip: OXNARD, CA 93036

Phone: (805) 382-6296 Fax: (213) 225-0085

Record ID: 560054AN
Service Type: RES-DETOX

Resident Capacity: 56 Total Occupancy: 85 Target Population: 1.4

Expiration Date: 9/30/2019 IMS: No

Program Name: A HEALING PLACE - THE ESTATES
Legal Name: PARADIGM RECOVERY GROUP, LLC
Address: 601 E. DAILY DRIVE, SUITE 205

City, State Zip: CAMARILLO, CA 93010

Phone: (844) 388-4100 Fax: (805) 914-0632

Record ID: 560055AP

Service Type: NON Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

Program Name: A HEALING PLACE - THE ESTATES
Legal Name: PARADIGM RECOVERY GROUP, LLC

Address: 192 RAMONA PLACE City, State Zip: CAMARILLO, CA 93010

Phone: (818) 618-0404 Fax: (805) 914-0632

Record ID: 560055BP

Service Type: RES
Resident Capacity: 6
Total Occupancy: 6
Target Population: 1.1

Expiration Date: 7/31/2019 IMS: No

As of 11/1/2017

Yolo County

Program Name: CACHE CREEK LODGE

Legal Name: CACHE CREEK LODGE, INC.

Address: 421, 435, AND 441 ASPEN STREET

City, State Zip: WOODLAND, CA 95695-2665

Phone: (530) 662-5727 Fax: (530) 892-1831

Record ID: 570004BN

Service Type: RES
Resident Capacity: 40
Total Occupancy: 40
Target Population: 1.2

Expiration Date: 7/31/2019 IMS: No

Program Name: WALTER'S HOUSE

Legal Name: YOLO WAYFARER CENTER (CHRISTIAN MISSION)

Address: 285 4TH STREET City, State Zip: WOODLAND, CA 95695

Phone: (530) 662-2699 Fax: (530) 662-6918

Record ID: 570008AN

Service Type: RES
Resident Capacity: 44
Total Occupancy: 44
Target Population: 1.1

Expiration Date: 8/31/2019 IMS: No

Program Name: FOURTH AND HOPE OUTPATIENT PROGRAM

Legal Name: YOLO WAYFARER CENTER (CHRISTIAN MISSION)

Address: 207 FOURTH STREET

City, State Zip: WOODLAND, CA 95695-3501

Phone: (530) 867-5010 Fax: (530) 661-2494

Record ID: 570008BN

Service Type: NON Target Population: 1.1

Expiration Date: 1/31/2019 IMS: No

Program Name: PROGRESS HOUSE YOLO COUNTY WOMEN AND CHILDREN'S FACILITY

Legal Name: PROGRESS HOUSE, INC.

Address: 15450 COUNTY ROAD 99, BUILDING A AND 15430 COUNTY ROAD 99, BUILDING B

City, State Zip: WOODLAND, CA 95695-9339

Phone: (530) 626-9240 Fax: (530) 668-8528

Record ID: 570009AN

Service Type: RES
Resident Capacity: 12
Total Occupancy: 27
Target Population: 1.1

Expiration Date: 6/30/2018 IMS: No

As of 11/1/2017 Yuba County

Program Name: PATHWAYS

Legal Name: MIDVALLEY RECOVERY FACILITIES, INCORPORATED

Address: 2 9TH STREET

City, State Zip: MARYSVILLE, CA 95901-5362

Phone: (530) 742-6670 Fax: (530) 674-4544

Record ID: 580001BN Service Type: RES-DETOX

Resident Capacity: 22 Total Occupancy: 23 Target Population: 1.1

12/31/2017 IMS: No Expiration Date:

Program Name: PATHWAYS

Legal Name: MIDVALLEY RECOVERY FACILITIES, INCORPORATED

Address: 2 9TH STREET

Address: 2 9TH STREET
City, State Zip: MARYSVILLE, CA 95901-5362

Phone: (530) 742-6670 Fax: (530) 674-4544

Record ID: 580001DN

Service Type: NON Target Population: 1.1

Expiration Date: 12/31/2017 IMS: No

Program Name: FOR OUR RECOVERING FAMILIES

Legal Name: COUNTY OF YUBA PROBATION FOR OUR RECOVERING (F.O.R) FAMILIES

Address: 8 7TH STREET

Address: 8 7TH STREET
City, State Zip: MARYSVILLE, CA 95901

Phone: (530) 749-5124 Fax: (530) 743-7364

Record ID: 580002AN Service Type: NON

Target Population: 1.13

6/30/2019 Expiration Date: IMS: No